

HOW TO REPORT OCCUPATIONAL DISEASES?



CALL AUTHORITY DUTY PHONE
733 2200



REPORT AN INCIDENT VIA IIN FORM
FROM SHENA WEBSITE
WWW.SHENA.GOV.BN



SUBMIT COMPLETED IIN FORM & RECEIVE
AUTO ACKNOWLEDGEMENT EMAIL FROM
SHENA WITH COPY OF THE IIN FORM

REPORT AN INCIDENT

REPORTING OF
OCCUPATIONAL DISEASE
CAN BE DONE ONLINE
BY COMPLETING
THE INITIAL INCIDENT
NOTIFICATION FORM



REFERRAL TO OCCUPATIONAL HEALTH CLINIC, MINISTRY OF HEALTH

As underlined in the NTI (Ref: 2023/NTI/11), issued on 17 October 2023, medical practitioners may refer any suspected Occupational Disease via a referral letter to the Occupational Health Clinic, Ministry of Health. The referral letter is to include the patient's contact details. Please refer to the QR code below for the referral and reporting flowchart for any suspected ODs.



2023/NTI/11
DUTY OF REGISTERED MEDICAL PRACTITIONER
TO REPORT OCCUPATIONAL DISEASES

Occupational Health Clinic
Ministry of Health
Level 1, Health Screening Centre
Jalan Delima Dua
Berakas BB2313
OR
Email: occuphealth@moh.gov.bn

MORE INFORMATION

WORKPLACE SAFETY AND
HEALTH ORDER, 2009



WORKPLACE SAFETY AND HEALTH
(INCIDENT REPORTING)
REGULATIONS, 2014



ILO 2022: DIAGNOSTIC AND
EXPOSURE CRITERIA FOR ODS



REPORTING OF
CONCERNS



GENERAL
ENQUIRIES



اوتوريتي كبحسا ان كسلامتن
كصيتن. دان عالم سكيتر
Safety, Health and Environment
National Authority

EMPOWERING OCCUPATIONAL DISEASES (ODs) REPORTING

REPORTING FOR A HEALTHIER WORKPLACE

Safety, Health and Environment National Authority (SHENA)

Level 4
Design & Technology (D&T) Building
Spg. 32-37, Kg. Anggerek Desa
Bandar Seri Begawan BB3713
Negara Brunei Darussalam

For further information and enquiries:

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 @shena.gov.bn
 t.me/SHENAbn



ANNOUNCEMENT OF INSPECTION CAMPAIGN ON OCCUPATIONAL DISEASES (ODs) REPORTING IN PRIVATE HEALTH CLINICS

This leaflet aims to serve as a further reference to promote compliance with the WSH (Incident Reporting) Regulations, 2014.

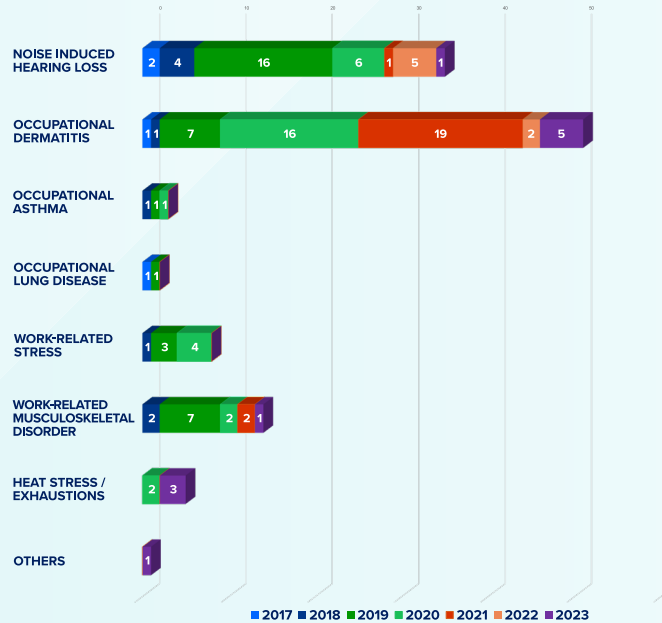
One of the powers of **SHENA warranted inspector** "to require hospitals, medical clinics, or mortuaries to provide information, including medical records of persons are either injured in a workplace accident or suspected of suffering an occupational disease contracted from their workplace and are currently receiving treatment at the hospital or medical clinic".

According to the **International Labour Organization (ILO)** (2023) Report, a joint study by the **World Health Organization (WHO)** and the ILO found the statistics below:



In Brunei Darussalam, **108 cases** of occupational and work-related diseases were reported to the Occupational Health Division, Ministry of Health from **2017 to 2022**, including occupational dermatitis, work-related musculoskeletal disorders and noise-induced hearing loss. While the 2022 incidence rate of occupational and work-related diseases in Brunei Darussalam is significantly lower than global figures i.e. **3.32 per 100,000 workers**, under-reporting remains a significant concern.

OCCUPATIONAL AND WORK-RELATED DISEASES



REPORTING OF OCCUPATIONAL DISEASES

Regulations 6 of the WSH (Incident Reporting) Regulations, 2014 state the duty to report ODs are as follows:

WHO SHALL REPORT	WHAT AND WHEN TO REPORT
Employer	<ul style="list-style-type: none"> Where an employee suffers an Occupational Disease at a workplace, and the employer of that employee receives a statement prepared by the RPM diagnosing the occupational disease. Submission of an official report to SHENA not later than 10 days after receipt of the written diagnosis.
Registered Medical Practitioner (RPM)	<ul style="list-style-type: none"> Where any employee has been diagnosed with an occupational disease by the RPM. Submission of an official report to SHENA not later than 10 days after the diagnosis.

Note: The employer and the registered medical practitioner shall report to SHENA separately for the same employee.

registered medical practitioner means a person registered under the Medical Practitioners and Dentists Act (Chapter 112).

OCCUPATIONAL DISEASES

As specified in the Third Schedule under the WSHO, 2009:

- | | | |
|--------------------------------|---------------------------------|---|
| 1. Aniline poisoning | 14. Chronic benzene poisoning | 28. Occupational skin diseases |
| 2. Anthrax | 15. Compressed air illness | 29. Occupational asthma |
| 3. Arsenical poisoning | 16. Cyanide poisoning | 30. Pesticide poisoning |
| 4. Asbestosis | 17. Epitheliomatous ulceration | 31. Phosphorous poisoning |
| 5. Barotrauma | 18. Glanders | 32. Poisoning from halogen derivatives of hydrocarbon compounds |
| 6. Beryllium poisoning | 19. Hydrogen sulphide poisoning | 33. Radiation |
| 7. Byssinosis | 20. Lead poisoning | 34. Rengas wood poisoning |
| 8. Cadmium poisoning | 21. Leptospirosis | 35. Repetitive strain disorders |
| 9. Carbon bisulphide poisoning | 22. Liver angiosarcoma | 36. Silicosis |
| 10. Carbon dioxide poisoning | 23. Manganese poisoning | 37. Toxic anaemia |
| 11. Carbon monoxide poisoning | 24. Mercurial poisoning | 38. Toxic hepatitis |
| 12. Cataract | 25. Mesothelioma | 39. Tuberculosis |
| 13. Chrome ulceration | 26. Nitrous fumes poisoning | |
| | 27. Noise-induced deafness | |

OFFENCES

In accordance with Regulation 9 of WSH (Incident Reporting) Regulations, 2014, an employer who contravenes regulation 6(1) and a registered medical practitioner who contravenes regulation 6(2) are guilty of an offence and liable on conviction -

- For a first offence:** to a fine not exceeding \$5,000; and
- For further subsequent offences:** a fine not exceeding \$10,000 or imprisonment for a long term not exceeding 6 months or both.



Any person knowingly makes any **false notification or report** to the Authority about the occurrence at any workplace of any accident, dangerous occurrence or occupational disease is **guilty of an offence** and liable on conviction to a **fine not exceeding \$5,000, imprisonment for a term not exceeding 6 months or both.**

WHY REPORT ODs?

- 1 Compliance with WSH (Incident Reporting) Regulations, 2014.**
- 2 Workers can access medical care and benefits when needed for early intervention and treatment.**
- 3 Identification of workplace health hazards, leading to preventive and corrective actions.**
- 4 Improved national ODs data collection and analysis to monitor trends, identify emerging risks, and develop effective policies and initiatives.**
- 5 Ethical obligation of medical practitioners to protect patient health and wellbeing.**
- 6 Promotion of public health and well-being by reducing deaths and illnesses caused by exposure to hazardous chemicals (UN SDG 2030 target 3.9).**

Reference: ILO Reporting, Recording and Notification of Occupational Accidents and Diseases: A brief guide for workers.



2024/NTI/07
Inspection Campaign on
Occupational Diseases (ODs) Reporting
for Private Health Clinics



**ILO INTRODUCTORY
REPORT 2023**