The Matrix of Competencies for Occupational Medicine Practice is meant to guide training, continued education and certification as specialist in Occupational Medicine. The first version of the matrix was developed for professional training purposes by the National Association of Occupational Medicine (Associação Nacional de Medicina do Trabalho – ANAMT) upon request by the Brazilian Medical Association (Associação Médica Brasileira – AMB) in 2002, following the recognition of occupational medicine as a specialty. Until then, occupational medicine was considered a subfield in preventive and social medicine residency programs.

The matrix was revised in 2016 and 2018 and is based in the notion of competency formulated by Perrenoud, to wit, the ability to mobilize multiple resources, including theoretical knowledge, professional skills and experience, for the solution of concrete problems. This theoretical framework has been increasingly used in the planning of training for healthcare professionals, particularly physicians as well in graduate programs in surgical and clinical medical specialties.

For physicians to be considered competent they should be able to make ethical and critical use of their knowledge and information in the solution of everyday concrete problems. Professionals should stay up to date in their field of action, know how to organize what they learned, master technical and psychomotor skills, and be able to communicate clearly and efficiently with their patients and family, colleagues and other actors within the social context. Their continuous goal should be the promotion, maintenance and restoration of the health, and improving the quality of life of the people under their responsibility, often while under the pressure of urgency and uncertainty.

For the development of the matrix, the authors selected proven methods used in similar studies, which included a broad-scope review of the technical-scientific literature, preparation of a preliminary matrix, which was subjected to peer-review, consolidation of results, and validation by experts.

In the 2018 revision of the competencies matrix, the authors sought to adjust and consolidate notions, remove duplicates, and hierarchize the competencies in a way to make it simpler and facilitate its application to practice. The results of this process are organized in five domains, which are depicted in Figure 1.

Domain 1 concerns the moral judgment competency, or professionalism, which is the ability of professionals to reflect in the face of concrete situations using their critical reason, knowledge and values to decide on the most appropriate practices and behaviors, while taking the right of workers to health and life into consideration. Domain 2 concerns the integral care of workers’ health at both the individual and collective levels by means of actions of health promotion and protection, surveillance and care delivery, including physical and professional rehabilitation. Domain 3 comprises competencies related to the study of work, including evaluation, analysis and intervention on actual or potential risks to the health and physical and mental integrity of workers. Domain 4 concerns the formulation and implementation of policies and management of workers’ health at the individual and collective levels. Domain 5 comprises a set of transversal competencies, including: adequate knowledge and application of the legislation on workplace safety and health, particularly laws and norms on labor, social security and health, Brazilian and foreign legislation; mastery of verbal and nonverbal communication skills, and interpersonal relationships based on dialogue and empathy to ensure the right to information and divulgate, and improve the understanding of issues related to the health and integration of people in the workplace; knowledge management for continued improvement of professional practice through the attitude and skills to learn continuously, commitment to the education, training and supervision of future professionals; and teamwork competency, including effective leadership and conflict mediation.
Thus the Matrix of Competencies Required for Occupational Medicine Practice - 2018 Update is the result of collective effort and will always be a “temporary synthesis” to be continuously evaluated and updated. We hope it will contribute to guide educational processes and the training and continued education of professionals able to perform well their social role, and committed to improve the working conditions for the promotion, protection and integral care of the Brazilian workers’ health.

REFERENCES