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The role and efficacy of management in influencing the
implementation of an occupational health and safety policy: A
case study of DaimlerChrysler South Africa East London.

A thesis submitted in fulfilment of the requirements of the

degree of

MASTER OF SOCIAL SCIENCE

of

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by

Jessica Samantha Pringle

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ABSTRACT

The existence of an occupational health and safety policy is believed to be evidence of management accepting their occupational health and safety role in terms of the Occupational Health and Safety Act. It is accepted that this results in management ensuring the provision of a safe workplace. Despite the emphasis in legislation (the Occupational Health and Safety Act) on the need for management to implement comprehensive occupational health and safety policies, there is a lack of research on the implementation and efficacy of occupational health and safety policies in the workplace. This study investigates the efficacy with which management carries out their occupational health and safety duties and responsibilities when implementing the provisions of an occupational health and safety policy in the workplace. A number of factors are essential to the efficient performance of management in this regard. These factors include managerial commitment, practices and strategies; communication practices and structures; training initiatives and information; the extent of employee and trade union involvement; and the infrastructure of the organisation. This research study is primarily qualitative in nature. Semi-structured interviews were the primary tool used by the researcher to collect the data. The case-study research method was employed to assist the researcher in collecting the data. The participants involved in the research were selected using the principles of strategic informant sampling and expert choice sampling. The participants consisted of a sample of management, employees and shop stewards. The research findings indicate that firstly, the presence of occupational health and safety policies, practices, strategies and systems in the workplace do not automatically result in reduced hazards, accidents or deaths in the workplace. Secondly, the participation schemes and the communication practices put in place by management are weak. The reason for their weakness is their ineffective implementation by management and use by employees and the trade union. Thirdly, management has a definite impact on the involvement, attitudes and actions of the employees and the trade union in occupational health and safety issues. Fourthly, there is an unequal partnership between management

and employees as a result of the educational differences regarding occupational health and safety between them. The outcome is that management and employees are faced with numerous challenges in relation to occupational health and safety. Contributing to this challenge is a lack of sufficient resources allocated to training, resulting ultimately in the ineffective monitoring of occupational health and safety in the workplace. The existence of occupational health and safety structures and systems does not provide the essential evidence to suggest that their mere presence makes a difference to the workplace safety level. However, through more co-operation and participation by all the parties, these structures and systems have the potential to be effective.

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DECLARATION STATEMENT

I declare that this is my own unaided work and that all the sources that I have drawn from to aid in the development of my argument in this research study are accurately and correctly acknowledged. It is being submitted for the Master of Arts Degree at Rhodes University, Grahamstown. It has not previously in its entirety or in part been submitted at any university in order to obtain an academic qualification.

Jessica Samantha Pringle

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ABBREVIATIONS

ACOHS	Advisory Council on Occupational Health and Safety
ANC	African National Congress
CCMA	Commission for Conciliation, Mediation and Arbitration
COSATU	Congress of South African Trade Unions
DCSA	DaimlerChrysler South Africa
GDP	Gross Domestic Product
HR	Human Resources
ILO	International Labour Organisation
IMS	Integrated Management System
LRA	Labour Relations Act
MOSA	Machinery and Occupational Safety Act
NOSA	National Occupational Safety Association
OHS	Occupational Health and Safety
OHSA	Occupational Health and Safety Act
PPE	Personal Protective Equipment
RDP	Reconstruction and Development Programme
SACP	South African Communist Party
SDA	Skills Development Act
SHE	Safety, Health, Environment
SHEQ	Safety, Health, Environment, Quality
VWSA	Volkswagen South Africa
WHO	World Health Organisation

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INTRODUCTION

1.1 FIELD OF RESEARCH

This study is about the role and efficacy of management influencing occupational health and safety policy implementation at the workplace. The case study used is the DaimlerChrysler South Africa (DCSA) East London manufacturing plant. In particular the thesis firstly, examines whether managers practice their occupational health and safety (OHS) duties and responsibilities with the aim of creating safe work places. Secondly, it analyses whether safe work places are created through the existence of an occupational health and safety policy. Thirdly, it questions whether the manner, in which management carries out their OHS duties and responsibilities, influences the actions and the attitudes of the employees and the trade union in relation to OHS.

The purpose of this case study is to establish the current state of occupational health and safety (OHS) at a leading automobile assembly plant in South Africa. Firstly, we need to evaluate the impact that management has on the prevailing OHS policy and structure. This will be done by establishing the efficacy with which managers practice their role – i.e. their duties and responsibilities in terms of the Occupational Health and Safety Act (OHSA) and the OHS management policy in the workplace, though the implementation and support of the provisions of the company's OHS policy. A further aspect involves identifying the manner in which management's OHS practices, influence the actions and the attitude of the employees and the trade union in relation to OHS. The third aspect is evaluating the roles of the employees regarding existing OHS structures. The final aspect for review would be the response of the trade union towards the prevailing OHS structures.

1.2 CONTEXT OF THE RESEARCH

The term 'role' is defined by (Wikipedia, 2006) as:

a set of connected behaviours, rights and obligations as conceptualised by actors in a social setting. It is mostly defined as an expected behaviour in a given social status and social position

The functionalist approach's definition of 'role' is said to be a set of expectations that society places on an individual. Through these expectations, management's activity is regulated in the workplace. Roles create regular patterns of behaviour and they allow individuals to function effectively (Wikipedia, 2006). A practice is defined by Wikipedia (2006: 17) as:

the way something is done. Work practices are ways of structuring the things managers must do, or ways in which it must be done.

Salamon (1992: 454) defines a practice as:

a set of decisions or actions which are made in response to a given problem or situation. Where such decisions or actions are made within the framework of an existing formal policy they may be regarded as a process of policy interpretation and application.

Managers must note that a policy by itself is of little value. The application of a policy in the workplace, through the practices of management provides positive evidence of the precise meaning and effect of the policy. It also provides evidence of the intention of management to implement its provisions. The process of interpreting and applying the policy is a significant part of the custom and practice of management within the organisation. The policy places constraints on management by creating expectations of a particular response to a particular situation (Salamon, 1992: 454).

Managers have a distinct set of policies which guide their action regarding the way workers are to be treated and particular events handled (Purcell, 1981: 25). It is noted by Purcell (1981: 25) that because of the power relations within the workplace, the policies

that are implemented by management do not always result in the desired outcome as there is a shortfall between aspiration and practice. An example of this is occupational health and safety in a workplace. In South Africa OHS issues in the workplace are governed by the Occupational Health and Safety Act (OHSA) 85 of 1993. OHS management policies are underlined by the Act. The Act is based on the recognition that employees have a right to be protected from harm by management in the workplace (Burger, 2006: 1).

It is argued by Dean that a manager's approach to managing employees is influenced by the manner in which they act out their roles (cited in Wikipedia, 2006). A manager's style of managing is a cause of concern to the workplace, the employees and themselves. It is stressed that a manager's style is one of the key contributors to the performance and the effectiveness of his division or department. Dean emphasises that "there is no single, universally accepted definition of managerial style; the common practice has been to consider the manager's leadership style as his style of managing" (cited in Wikipedia, 2006). However, leadership is only one mechanism that managers may use to motivate others toward organisational goals.

When attempting to implement the most successful managerial or leadership system, one finds that there is not just one leader, but rather many strong leaders working together to achieve a common goal. Fred A Manske is quoted in Maxwell, F (2003: 10) saying "the greatest leader is willing to train people and develop them to the point that they eventually surpass him or her in knowledge and ability". Managements' success can be defined as the maximum utilisation of the abilities of those around them. The important question then, is not whether management will influence them, but rather how they will use their influence. The attitudes of managers have a profound impact on the workplace. Management cannot ignore the attitudes of those around them and expect to achieve success, as Maxwell, F (2003: 14) puts it "a persons' attitude impacts their relationships, colours their view of failure and defines their approach to success".

Maller and Steinberg (1984: 61) make apparent the fact that OHS is an area of conflict between management and their employees. The reason being that management is reluctant to spend extra resources on the aspects of the production processes that do not result in direct profits. Managements' principal goal is to make a profit with the aim of retaining surplus value. Employees are seen by management as being commodities (Maller & Steinberg, 1984: 61). When managers are experiencing pressure to create attractive environments for investments and profits, health and safety are the first aspects of the workplace to experience budget cuts. Health and Safety are paid for out of the profit that the company makes and therefore, management often has the attitude that they can choose to implement it or not, as it is seen as being an extra burden. Often OHS is not seen to be an integral part of the way work is done by management (Maller & Steinberg, 1984: 61).

According to Macun and Meyers (1991: 11) the legislative framework surrounding OHS has undergone important changes since the 1980's. Maller and Steinberg make apparent that the Machinery and Occupational Safety Act (MOSA) was replaced by OHSA and its aim was to modernise South Africa's occupational health and safety system (cited in Burger 2006: 1). MOSA was problematic for a number of reasons including the fact that management had total control over health and safety in the workplace. OHS structures were established solely by management with the result that employees had little or no influence over the decision-making surrounding health and safety matters.

Hoogervorst argues that on the contrary, OHSA reflects the idea of co-operation and promotes it through providing for participatory structures in the workplace. OHSA outlines the minimum roles and responsibilities of management and employees in the workplace. The provisions of this Act are comprehensive, but there are problems in implementing them effectively. A reason for this could be that the Act is broad and needs to be tailored to suite the nature of the different workplaces and their work forces (cited in Burger, 2006: 3). Hoogervorst explains that,

a system is only as good as the people who work within it. The best system in the world will fail if the people working in it are not informed, motivated, trained and committed to making that system work (cited in Burger, 2006: 5).

Therefore, management and employees need to be an integral part of the development of an OHS policy and system. Managerial principles that include participative management are essential to implement as employees will have the ability to voice their views on health and safety matters (Storey and Sission, 2003: 203). This could be achieved through the effective functioning of health and safety committees. Employees are always going to have their own views, ideas, experiences and suggestions that could be used to build on management's practices that already exist. This could help ensure greater success in the development of an effective occupational health and safety policy.

The South African trade unions are fighting for tougher laws and rights to monitor management's health and safety practices in the workplace. Studies conducted over the past decade show that there is still a lack of awareness concerning health and safety by management and employees in South Africa (Fisher and Fletcher, 1987: 37-40, Ahwireng-Obeng and Akussa, 2003: 7-30). In 2004 the Congress of South African Trade Unions (COSATU) and the South African Communist Party (SACP) expressed their outrage "at the appalling working conditions some employees are facing" (News 24, 2004). Effective communication structures need to be in place between management and the trade union. The objectives of trade unions include improving the terms of employment and the physical working conditions of the workers. Studies have shown that where programmes on health and safety have been implemented, it led into the promotion of human capital and ultimately more active worker involvement in the production process (Batstone, 1998: 1). Finnemore (1986: 67-69) argues that a "lack of concern by many employers regarding occupational health and safety and the poor education of the employees and union representatives on occupational health and safety matters have resulted in many health hazards of workplaces remaining unchallenged".

1.2.1 Why Focus on Management?

Under OHSA, management is responsible for providing and maintain a working environment that is safe and without risk to the health of all employees. Included in this responsibility is ensuring that the systems of work as well as the machinery used by the employees are safe. Managers are primarily responsible for eliminating potential and actual hazards. They must provide employees with adequate information and training that is required for them to perform their duties safely. All measures need to be enforced in the interest of health and safety. However, managers are not fulfilling this responsibility efficiently as the International Labour Organisation (ILO) has made apparent in 2004 that an average of 6 000 deaths per day result from accidents in the workplace or occupational diseases. Annually a total of 2.3 million workplace deaths occur. In South Africa occupational accidents and diseases cost the country R30 billion (Department of Labour, 2004. *sell your labour not your lives*). The problem of health and safety as well as the effectiveness of the manner in which managers carry out their roles is worthy of research attention. The lack of research on the implementation and efficacy of OHS policies in the workplace suggests that very little is known about this.

1.2.2 Why is the Problem worth Addressing?

Health and safety in South Africa is worth addressing. Even though legislation has changed, the conditions in which many employees are working have not changed. Occupational accidents are the outcome of the negligence of management and employees. They result in employees losing their lives. It is not just the individual employee who is affected by an injury, death or disease, but also their family. The affected employee primarily suffers physical and emotional pain. The cost of this to the business is huge. This is a sociological concern as factors such as pain, loss, suffering, self-confidence, their role in the family, community and the workplace necessitate consideration when an employee is involved and affected by an occupational accident.

Seller, Slate and Strydom emphasise that, what managers say and do regarding OHS is incongruent as “their day to day behaviour often demonstrates that matters like production, quality and finances actually have a higher priority” (cited in Burger 2006:

4). One of the many possible reasons for safety initiatives failing on the shop floor is because the values and the practices of management are inconsistent with their objectives. NAOSH week confirms this view as they argue that “there are still too many employers whose compliance with occupational health and safety laws and regulations is spotty or non-existent” (cited in Burger 2006: 4).

1.2.3 Choice of DaimlerChrysler East London as the Case Study

DCSA East London was chosen as a case study because it is one of the reputable companies in South Africa. Secondly, it is the largest employer in South Africa’s Border Kei region, maintaining its status as a major contributor to regional economic growth. It has a workforce of over three thousand employees (www.daimlerchrysler.co.za). It is one of the primary driving forces in the Eastern Cape’s economy. The company boasts an excellent safety record together with OHS structures (www.daimlerchrysler.co.za). The company is a valuable asset to this research. Its organisational structure satisfies the requirements of the research.

1.2.4 Why Focus on the Motor Manufacturing Industry?

The motor manufacturing industry was chosen because of the central role that it plays in the South African economy. In the opinion of Haynes (2005: 7) South Africa is currently the biggest domestic market for vehicles in South Africa as it accounts for eighty percent of the continent’s production. The country is also being used as a portal for distributing vehicles throughout sub-Saharan Africa. The ability of South Africa to continue as a global export of vehicles and components has been improved by modest economic growth and political stability.

The seven commercial ports in South Africa have been expanding their facilities to ensure their ability to handle automotive imports and exports. These developments enable South Africa to act as the central trading post in and out of sub-Saharan Africa, as well as to Asia, Europe and the America’s (Haynes, 2005: 7). Vast improvements have been

made to infrastructure. One of South Africa's largest infrastructure projects is a new deep water port and industrial development zone situated at Coega, near Port Elizabeth. This port has special automotive facilities and was scheduled to start opening in the fourth quarter of 2005 (Haynes, 2005: 8). Major investments have also been made to improve port and road facilities in Durban and East London, the other major centres for automobile assembly. Investments have been made to inland infrastructure, servicing the greater Johannesburg area. This has resulted in positive competition between the inland and the coastal automotive plants to attract investment and create jobs (Haynes, 2005: 8).

Owing to the fact that South Africa's automobile manufacturing industry leans on exportation safety, health and environmental demands and standards have been placed on the country by the government and international investors. As Ryan (2004: 48) explains,

an independent safety, health and environmental rating (NOSA) confers international legitimacy on companies. In an export orientated economy such as South Africa, this is worth gold.

South African exporters including the motor manufacturing industries now have to comply with minimum standards of safety, health and environmental management. According to Kotze (cited in Ryan, 2004: 28) automotive plants are increasingly being certified by NOSA. The reason being that management is realising that this is crucial for them to remain competitive and it also makes good business sense to prioritise OHS within manufacturing plants.

NOSA has noted that businesses are increasingly showing an interest in their five star certification system. The latter provides companies with the ability to quantitatively measure their health and safety and environmental achievements and improve them annually (Ryan, 2004: 28). Implementing these requirements is costly, since companies have to spend large amounts of money to reach the required standards. This poses a challenge for management. It is emphasised by Ryan (2004: 28) that these requirements ensure that management and employees benefit from a safe workplace, provided that they are effectively implemented.

1.3 RESEARCH OBJECTIVES

The objectives of the case study are as follows:

1. Evaluation of the efficacy of management regarding their role in OHS matters in the context of the provisions of OHSA.
2. Comparing employees' understanding of their role in OHS matters with the duties of employees contained in OHSA.
3. Identifying the challenges and constraints faced by management when implementing an OHS policy. Implementation and outcome will be assessed through the evaluation of training initiatives, educational level of the workforce, communication structures from the shop floor to top management and vice versa, as well as establishing whether the company has the necessary resources and infrastructures to effectively manage OHS.
4. The commitment of management and the employees to the implementation of an OHS policy is evaluated through their involvement in OHS matters, the identification of changes and improvements that their health and safety policy has undergone, the policy's sustainability and how conducive the working relationship between management and employees is with regard to OHS matters.
5. Assessing the role that the trade union plays in OHS matters in the company by assessing how well they represent their members' interests with regard to the health and safety policy.
6. Establishing whether management and workers agree that there are positive aspects to implementing an effective OHS policy at the company.
7. Evaluating the impacts that occupational health has on occupational safety.

1.4 RESEARCH METHODS

The data collection methods include documents (newspaper reports and relevant company documents), and in-depth interviews. It will consist of two parts. The case study

research approach will be used because it allows an intense investigation of the study unit. The case study will be studied through qualitative methods such as in-depth interviews. Due to the research being analytical, the case study is the most suited method to use as it will provide rich information about the respondents particular situations. It will also enable the study of people's experiences of the working environment and the effect that people have on their working environment.

The qualitative research approach has been chosen because the study aims to explore the richness of people's experiences in their situations, rather than attempting to quantify their experiences and analyse them statistically (Creswell, 1994: 15, 92). Purposive sampling will be used specifically through strategic informant sampling and expert choice sampling regarding management, employees and the shop stewards. The study population is the motor manufacturing industry, specifically DCSA East London (Babbie, 2004: 244-250, 189-190; Huyhusamen, 1994: 144-147, 172-176; Creswell, 1994: 179-208).

1.5 THE PARAMETERS OF THE RESEARCH STUDY

Six crucial issues form the parameters of the research. The analysis of these issues contributes to the development of the central argument, viz 'the efficacy, with which management carries out their role in relation to OHS, influences the implementation of the provisions of an occupational health and safety policy in the workplace'. The first issue concerns the methodology of the research study. Then the methodological orientation of the research is analysed, followed by the identification of the respondents participating in the study and the sampling techniques employed. The data analysis procedure of the case study is analysed.

The second issue analysed is a review of South African occupational health and safety literature and legislation relevant to the case study. Included is an analysis of the historical background of occupational health and safety in South Africa before 1994.

Then the focal points of OHS relevant to this research study are stated. Following this is an analysis of the state of OHS in South Africa after 1994. The role of management in implementing OHS policies is analysed. In addition, managements' attempt to introduce participatory initiatives is analysed, followed by the identification of the obstacles and the weaknesses of participatory management in South Africa. The importance of OHS training initiatives becoming a central factor for management is also highlighted. The final analysis considers the manner in which management shapes the involvement of the trade unions in health and safety decision making in the workplace.

Thirdly, an outline of the role and views of employees in the OHS structures of the company is provided. A review and examination of the working conditions of the employees from the five production divisions is analysed. Then the contribution made by workplace inspections to the establishment of safe work practices is analysed. This is followed by an analysis of the extent to which employees actively participate in the development of safe work practices. The fourth analysis determines the manner in which employees view their role in OHS and the extent of their support for managements' initiatives. Finally, an analysis of the level of knowledge possessed by the employees regarding the legal aspects of OHS and the employees' opinions of the training that they receive exists.

Fourthly, is a discussion of the trade union's responses to management's OHS practices. Firstly, the trade union's objectives are analysed. Secondly, an evaluation of the extent of the trade union's active participation in OHS is analysed. Thirdly, an outline of the opportunities created by management allowing the shop stewards to broaden their OHS knowledge is analysed. Following this is an analysis of the communication practices used by the trade union to educate their members regarding OHS awareness, developments and changes. An evaluation of the trade union's support of management's OHS initiatives follows. Finally, there is an analysis of the challenges facing the trade union in relation to OHS.

Fifthly, is a discussion of the dynamic role of managements' in relation to OHS. An outline of the managerial structure and function in relation to OHS is provided. Then the analysis on the implementation of the safety, health and environmental policy by the production managers is sub-divided into three focal discussion points, in an effort to determine the manner in which they implement the provisions of the OHS management policy.

The sixth discussion establishes the influence that occupational health has on occupational safety. The researcher identifies the various strategies used by management to promote occupational health. Then an analysis evaluating the services offered by the occupational health department exists. The final analysis outlines the challenges faced by the occupational health management staff.

Finally, an analysis of the OHS incident statistics for the period 1 January 2001 to 30 July 2006 is discussed. This aims to serve as evidence of the comprehensive OHS incident monitoring and evaluation system that the company has in place. The efficacy of their OHS programme is shown through the tables and graphs depicting the trend in all OHS incidences during this specific time period.

1.6 MAIN FINDINGS OF THE RESEARCH

- 1.6.1 Although OHS provides managers with minimum guidelines in relation to OHS many are not adhering to its provisions.
- 1.6.2 The actions of a small percentage of management are incongruent with their goals and objectives stated in their OHS policy.
- 1.6.3 It can not be said that all managers and employees have a clear understanding of their role in occupational health and safety.
- 1.6.4 The challenges faced by management, employees and the trade union can be interlinked. Managements' awareness of this must be raised so that OHS challenges can be addressed comprehensively and immediately.

- 1.6.5 Top management is evidently committed to OHS, but middle management still needs convincing of the benefits of sound OHS systems.
- 1.6.6 Management's OHS actions and attitudes have a definite impact on the perceptions of employees and the trade union in relation to OHS. This is clear in the experiences of the employees and the managers of the five divisions.
- 1.6.7 Safety representatives are realising that they have an important role to play in enhancing OHS in the workplace and they are more proactive than the trade union.
- 1.6.8 The notion of employee participation is paramount to improving health and safety practices at work together with comprehensive communication practices.
- 1.6.9 The mere existence of a health and safety policy does not automatically result in a safe workplace.
- 1.6.10 Through the experiences of the medical department, the trade union and the employees it is confirmed that there is a strong relationship between occupational health and occupational safety.

1.7 CONCLUSION

This chapter lays the foundation of the research. The research is motivated and the research problem and hypothesis are introduced. The research is justified and the research strategy is briefly described. The parameters of the research are also discussed. The following chapter will focus in detail on the method and design of the research. Specific reference is made to the rationale for using the qualitative research design, the case study approach and the use of semi-structured interviews in collecting data is discussed. Included in this discussion is the sampling procedures employed by the researcher. Finally, an analysis of the qualitative data using interpretive techniques is discussed.

2

METHOD

2.1 INTRODUCTION

The chapter delineates the qualitative research conducted, outlining the research methods and reasons why a case study's research approach, is the most appropriate method used in this research study. A list of the respondents is also provided. Anonymity is preferred on the request of the respondents in instances where no surname is provided. Purposive sampling is used for the selection of respondents, due to the researcher having a specific purpose in mind. Two sampling techniques are chosen, the first expert choice sampling and the second strategic informant sampling. The data collection methods, used in the research are outlined. These include semi structured interviews as the primary method, a study of relevant documents and an observation of the production process at DaimlerChrysler South Africa (DCSA) East London. Finally, the approaches that are used to analyse the data are discussed.

2.2 METHODOLOGICAL ORIENTATION

This qualitative study approaches the research question using case study and interpretive techniques. Interpretivism is an approach to social science that emphasises the importance of the participants' understanding of the phenomenon under investigation

(Puttergril, 2000: 36). Sensitivity to the patterns and regularities in the participant's responses will allow the researcher to interpret the data subjectively. This sensitivity allows the researcher to understand how the participants experience, interpret and understand the impact of the efficacy of management in implementing occupational health and safety policy provisions.

Neuman argues that qualitative research involves documenting real events, recording what people say depending on the issue, observing specific behaviours, studying written documents or examining visual aids. The objective of such techniques is to enable the researcher to draw and interpret meaning from the point of view of those being researched or the documents and behaviours being observed (cited in Burger, 2006: 94). Mayakut and Richard note that the task of the qualitative researcher is to "find patterns within those words and actions and to present those patterns for others to inspect, while at the same time staying as close to the construction of the world as the participants originally experienced it" (cited in Burger, 2006: 94). The most fundamental characteristic of qualitative research is the strategy of taking the subject's perspective in terms of seeing through the eyes of the people you are studying.

Qualitative research methods are employed as it is viewed as an approach that provides in-depth material covering a vast range of research styles. In the words of Silverman "qualitative research is open-ended interviews or panel studies lacking a clear analytic basis in social theory" (cited in Miller and Dingwall, 1997: 14). The validity of qualitative research is questioned by various researchers. An important point for researchers to note is that analytic integrity is the sole requirement for any research study (Huyhusamen, 1994: 144-147; Creswell, 1994: 60-65; Terre Blanche and Durrheim, 2000: 143-146). This will be dealt with in more detail in section 2.5

Hammersley, Gomm and Forster (2002: 2) answer the question 'what is case study' as follows, "in one sense all research is a case study: there is always some unit or set of units, in relation to which data are collected and or analyzed". In this case study, the study population is the automobile manufacturing industry. The sampling unit is DCSA

East London. The primary unit of analysis is the management, employees, trade union representatives and occupational health staff at the East London plant.

2.3 RATIONALE FOR THE CASE STUDY APPROACH

Case study research is identified as a specific form of inquiry, consisting of two important dimensions. The first being the number of cases investigated and the second is the amount of detailed information that the researcher collects about each of the cases that are studied. The fewer the cases that are studied, the more information can be collected about each case. As Hammersley, Gomm and Forster (2002: 3) put it, “case study refers to research that investigates a few cases, often just one in considerable depth”. This research takes on the form of a single case study, which can be said to be explanatory because the researcher is asking ‘how’ and ‘why’ questions as it is made evident in section 2.1. The case study approach has a distinct advantage for this research, because a ‘how’ or ‘why’ question is being asked about a contemporary real life situations and provide the basis for the application of ideas and extension of research methods. This is a holistic case study as there are no embedded units of analysis. This case study involves intensive data collection at the same site (Yin, 1994: 21).

The method of case studies implies the collection of unstructured data and the qualitative analysis of those data. Theoretical propositions are important in guiding data collection and analysis (Yin, 1994: 13). The theoretical basis of this research is discussed in chapter three. The role of theory is emphasised by researchers who make use of case study research method, as is common in other research methods and approaches. There are differing views about the nature of the theoretical perspective that is required when using case study techniques. Social science researchers hold the view that theory must make sense of a case as a bounded system. This will make sure that the case is understood as a unique configuration that can only be understood as a whole. Other social science researchers hold the view that the role of theory is to locate and explain what goes on within a case in terms of its wider social context (Creswell, 1994: 26-28). Without these processes intra case processes will be misunderstood. The parameters of this case study

are set in chapter one. Only the relevant theories and literature are reflected on in chapter three to analyse the actions of those individuals within the case. The literature that the researcher draws on assists in setting the boundaries of the case study as only specific aspects are analysed by the researcher.

Yin (1994: 23) defines the case study research approach as an empirical inquiry that investigates a contemporary phenomenon within its real-life context; when the boundaries between phenomenon and context are not clearly evident; and in which multiple sources of evidence are used. This is apparent in the researcher conducting the research at the manufacturing plant. Subjects were interviewed on the shop floor, during production time. This gave the researcher first hand insight into the working conditions of the employees through observation.

Case studies are viewed by Hakim (1987: 61) as being the social research equivalent of the spotlight on the microscope. The value of the case study depends crucially on how well the study is focussed around a particular issue. Successful case studies provide readers with three dimensional pictures and illustrate the relationships, microscopical issues and patterns of influence in a particular context (Belle, 2002: 12). The fact that this approach uses a variety of data collection techniques, allows a more rounded holistic study than with any other design. Section 2.3 echoes this point as the researcher makes apparent that various sources i.e. people, documents and books were used to aid the data collection procedures.

This is one of the many strengths of case study research that makes it one of the most powerful research designs (Hakim, 1987: 63). Easton (2000: 217) notes that case studies are:

the acceptance of small sample numbers, the creative use of a variety of data sources, an emphasis on processes as the key area to be understood and, above all, the need to identify the causal mechanisms that underlie the processes that we are observing by continuing to ask the question why and collecting data until we believe we have an explanation

According to the realist view of case studies, the world consists of real objects and their relations with each other. These relations combine resulting in events which occur in the actual world. Case study research is used to describe this world. This type of research is said to be reactive because what happens at point B depends on what happened at point A therefore, the researcher might have to go back over old ground, but in a different way (Easton, 2000: 211-212). Concepts are induced from the data to measure their relationship with reality. All researchers, including case study researchers must therefore:

1. be inquisitive;
2. look for roots of things;
3. disentangle complexities;
4. conceptualise and reconceptualise;
5. test and retest (Easton, 2000: 212).

Positivism poses a critique against the generalisability of case studies. The question that it puts forward is “what can one case tell you?” and the answer that it proposes is “very little indeed” (Easton, 2000: 214). Positivism has its own form of generalisation which they outline as

the form of generalisation, which is highly limited in practice, is generalising to the population from a sample. The larger the sample, the more certain one can be about the nature of the population (Easton, 2000: 214).

This critique is also seen by many researchers as being a disadvantage of the case study method. Some researchers argue that it is difficult, if not impossible to generalise because of their inherent subjectivity. Secondly, it is argued that case studies are based on qualitative subject data (although quantitative techniques are also used in a case study) which can only be generalised to a particular context. Being aware of the disadvantages will enable the approach to be used more effectively and efficiently. It is imperative that researchers know the disadvantages of the approach they are using so that appropriate choices are made by them. Secondly, informed decisions must be made regarding the methodological framework of a research study. This will assist the researcher in dealing

with the consequences which they did not anticipate and ensure that the disadvantages will not affect them. This allows the researcher to view their choice in its entirety.

Critics of the case study approach believe that the study of a small number of cases can offer no grounds for establishing reliability or generality of findings. However, the researcher is not concerned to generalise from one case to a specific population, but rather to generalise the findings to the population in the case study. Therefore, generalisation in this sense is not referring to a population, but rather to a real world that has been uncovered in the case study. This is referred to as analytic generalisation by Yin as he explains it as

The short answer is that case studies, like experiments, are generalisable to theoretical propositions and not to populations or universes. In this sense, the case study, like the experiment, does not represent a sample and the investigators goal is to expand and generalise

1. to treat the evidence fairly;
2. to produce compelling analytic conclusions;
3. to rule out alternative interpretations (Yin, 1994: 103).

This analytic strategy has a role in assisting the researcher to choose the most appropriate qualitative data analysis techniques that suit the research study. It also assists the researcher in successfully completing the analytic phase of the research. The general analytic strategy that the researcher chooses to use in this study is relying on theoretical propositions. The objectives and the design of the case study are based on such propositions. They guide the researcher in:

1. developing the research questions that are used in the semi-structured interview schedule
2. reviewing the literature; and
3. contributing to the choice of data collection plan that is used in the study (Yin, 1994: 104).

The discussion of the findings in the report is also structured along these themes.

The case proposition guides and realises the case study analysis. In addition it aids the researcher in focusing attention on specific data and ignoring redundancies. It organises the case study and defines alternative explanations or rival explanations. In the opinion of Yin (1994: 104), “theoretical propositions about causal relations - answers to “how” and “why” questions - can be very useful in guiding case study analysis in this manner”. The best preparation, according to Yin (1994: 105), is to have a general analytic strategy as it underlies the specific analytic procedures.

The grounded theory techniques will be employed together with the case study techniques in order to enhance the data analysis process. The main steps within grounded theory are concerned with the discovery of theory from the data (Bryman and Burgess, 1994: 4). These two approaches comprise the general strategy.

Step one involves the collection and the reflection of the data. Step two deals with the researcher generating categories which fit the data. Further research is undertaken until the categories are saturated and the researcher feels assured about their meaning and importance. In step three the researcher conducts further theoretical reflection. The concern now is with the interconnections among the categories. The links that the researcher identifies between the categories require further testing and reflection (Bryman and Burgess, 1994: 4). Step four is coding. That is a key step in the process (Bryman and Burgess, 1994: 5). Here similarities and common themes are sought as the information in each category is compared. It has been described by Charmaz (cited in Bryman and Burgess, 1994: 5) as:

simply the process of categorizing and sorting data. Codes serve to summarize, synthesise and sort many observations made out of the data.

Coding provides the link between data and the conceptualisation. Open coding or initial coding is the first coding process and it refers to the process of breaking down,

examining, comparing, conceptualising and categorising data. The next coding process employed by the researcher is axial coding. This involves a set of procedures whereby data are put back together in new ways after open coding, by making connections between categories (Bryman and Burgess, 1994: 5). Coding is widely used in qualitative analysis, but it is applied in more than one way. Richards and Richards (cited in Bryman and Burgess, 1994: 5) mention one of these as “the task of fitting data and concepts together in such a way that conceptualization is under constant revision as in grounded theory”. Another key element in grounded theory is memo writing. This involves the constant writing of memos relating to the codes or to the connections between the emerging concepts, which elaborate the data and which represents the first step in the emergence of theory (Bryman and Burgess, 1994: 5).

The method of grounded theory entails a continuous comparison of data and model throughout the research project. A framework of the research is developed based on existing literature, conversations with colleagues and interviews. The researcher is required to move back and forth between the emerging model and the evidence throughout the data gathering and writing stage. Through this process, some elements suggested by the literature and prior institutions could be grounded in evidence, while others could not (Easton, 2000: 214).

Data was consequently analysed according to the structure of the interview schedule. Qualitative data yielded by the semi-structured interview schedule were analysed according to the structure of the interview schedule as well as the emerging themes. Analysing the data according to these categories correlated with the main ideas identified in the dissertation, which include: a brief overview of the organisation, the organisational departments, management commitment, trade union strategies, levels of employee participation and the involvement of health and safety experts with regard to the effective enforcement of health and safety policies in the workplace.

2.5.3 Processes for Analysing Qualitative Data

Generation of concepts

Here, the purpose is to immerse the researcher in the data. Patterns are identified in the data as well as surprising phenomena. The researcher needs to be sensitive to any inconsistencies such as different views that are offered by the individuals. It is also required that the researcher be sensitive to the repetition of words, irregularities, unusual occurrences, as well as the manner in which people say things i.e. whether it was said with a smile or a laugh (Bryman and Burgess, 1994: 6).

Building typologies and taxonomies

This is a second important aspect of analysis. The researcher is required to separate sub-groups within a general category. This process helps the researcher identify any differences in the data and it assists in singling out relationships that exist among concepts. Patterns are also identified in the data. It also assists the researcher in distinguishing between analysis in the field and analysis after data collection (Bryman and Burgess, 1994: 7). Researchers need to be constantly engaging in preliminary analytic strategies during data collection. The strategies are:

- narrowing down the focus of the study;
- continuously reviewing field notes to determine whether new questions could be fruitfully asked; and
- Writing memos of what was found in relation to various issues.

This can be summed up as an analysis in the field (Bryman and Burgess, 1994: 7). Analysis after the field is concerned with the researcher developing a coding or a categorisation system. This system includes codes for: “setting/context codes, informants’ perspectives, how informants think about people and objects, process codes, activity codes, strategy codes and personal relationship codes” (Bryman and Burgess, 1994: 7).

It is noted by Bryman and Burgess (1994: 12) that “there is no standard approach to the analysis of qualitative data secondly, that data analysis relates not only to technical procedures, but also to the social relations aspects of fieldwork; finally, much of the work in which investigators engage in, in this phase of the research process is as much implicit as explicit”. Lotland provides a classification of social phenomena which the researcher has employed as the basis for the coding or categorisation scheme (cited in Bryman and Burgess, 1994: 8). This classification has a direct link to figure 2.1. These social phenomena are:

- Acts: is an action in a situation which is temporary or brief, lasting only for a few seconds.
- Activities: are actions in a particular setting which last for a longer time period than acts. The individual is significantly more involved in this setting.
- Meanings: are the verbal productions of the participants that define and direct their action.
- Participation: is the individual’s holistic involvement in a situation or the manner in which they adapt to a setting or a situation in the study.
- Relationships: refer to the interrelationships that exist between a number of people at the same time.
- Settings: refer to the entire setting which is under study and is therefore considered to be the unit of analysis.

Although the strategies and processes that the researcher draws on are described, the following brief discussion, drawn from the work of Lotland (cited in Bryman and Burgess, 1994: 9), explores the manner in which they will be used in practice. The researcher uses a set of questions to assist in constructing the research accounts. The questions include: the manner in which the researcher keeps the interviews i.e. whether they are typed or carbons. The second question deals with the tools that the researcher employs to facilitate the recording of the material and working at its analysis. The third question deals with the manner in which the researcher files, codes or encodes the raw

data that is collected. The fourth question deals with the manner in which the researcher organises their present analysis. The fifth questions the kinds of models and images that the researcher is using to assist in organising their data. The sixth deals with the degree to which the researcher organises the analysis before writing it out in text, versus writing it and then seeing what she has. The seventh question requires researchers to highlight their most significant difficulties and facilitants that they experiences in developing the analysis and writing the research up. The eighth question requires the researcher to explore the manner in which he or she would modify their practices since doing the research study. Qualitative researchers need to ensure the validity of their research findings.

Validity refers to the degree to which the research conclusion is sound. There are five different kinds of validity that the researcher needs to ensure:

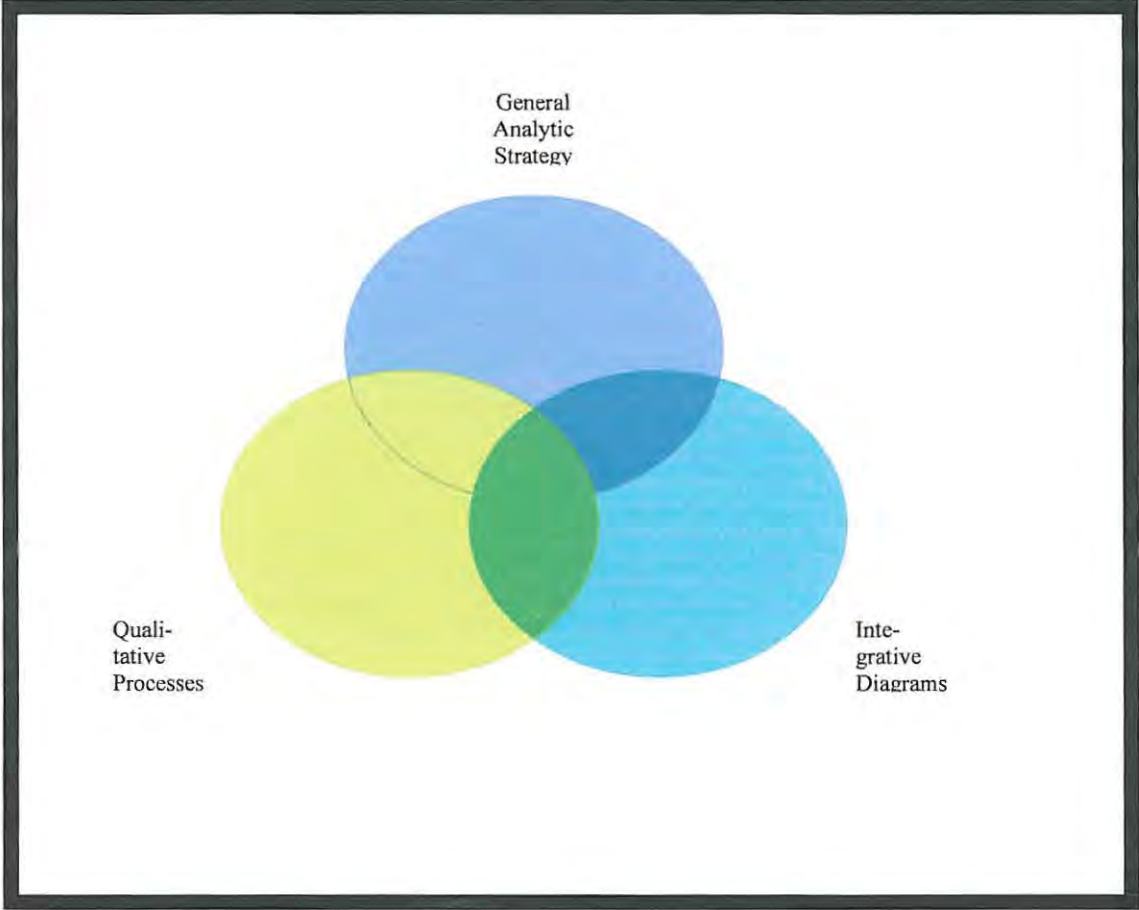
1. Internal validity is the extent to which causal conclusions can be drawn.
2. External validity is the extent to which generalising from the data and context of the research study to the broader populations and settings is possible.
3. Measurement validity is the extent to which the constructs in the research question are successfully operationalised.
4. The fact that this study uses multiple sources of evidence, tests the construct validity of this case study (Yin, 1994: 19). A key informant, Dr Panter, has been asked to review the draft case study, which will contribute further to the testing of its construct validity.
5. Interpretive validity is the extent to which the appropriate conclusions are drawn from the data (Terre Blanche and Durrheim, 2002: 62).

To evaluate the validity of the researcher's proposal, the researcher should think about his or her anticipated findings and conclusions and ask "how could I be wrong?" (Terre Blanche and Durrheim, 2002: 62). There are many different areas of research where validity may be threatened. Although all these types of validity are important in research, their relative emphasis may vary depending on the nature of the research question.

Explanatory research typically values internal validity over external validity. Generating plausible rival hypotheses is a general tactic to ensure the validity of a research design (Terre Blanche and Durrheim, 2002: 62).

The data analysis process can be seen to start with a brainstorming process as the researcher organises the case description through relying on theoretical propositions. A comparative analysis aptly describes the process of data analysis. Integrative diagramming is used throughout the analysis to depict the relationship between patterns and assist in building explanations. The diagrams assist in summarising the most important information as well as identifying gaps and discrepancies within the data. The data analysis process is depicted below. The importance of researchers having a general analytic strategy is shown through the more specific techniques stemming from it. The general strategy employed by the researcher assists in determining the specific techniques that are going to be employed.

Figure 2.3: Data Analysis Techniques



2.6 CONCLUSION

A step by step exposition of the manner in which the research was conducted is given in this chapter. The problem statement is revisited and the research techniques are described and justified. The research design is a combination of exploratory and descriptive designs. The advantage and the disadvantages of the approach are outlined, but the advantages outweigh the disadvantages. It becomes evident that the case study's techniques are the most appropriate to employ in attempting to answer the research question. The choice of sampling enhances the quality of the research study, as it is suited to the research question. Comprehensive data analysis procedures are implemented to

ensure that this qualitative study is as objective as possible. It is important that researchers provide a framework for the context in which his or her research is going to take place. The various literatures, theories and relevant OHS legislation that provide such a context will be outlined in chapter three to assist in addressing the central research question.

3

OCCUPATIONAL HEALTH AND SAFETY IN SOUTH AFRICA: A REVIEW OF THE LITERATURE AND LEGISLATION

3.1 INTRODUCTION

This chapter provides a conceptual framework addressing the central research question i.e. 'the role and efficacy of management in implementing the provisions of an occupational health and safety policy in the workplace'. Several aspects are analysed, guiding the essence of the topic of the chapter. The first aspect outlines the legislative framework that governs OHS, including a discussion on the underlying principles in which managerial practices are embedded. Following this is a discussion of the historical background of OHS in South Africa before 1994. Stemming from this is a reflection on specific aspects of the current OHS legislation such as the definition of occupational health as well as the roles and responsibilities of management and employees in terms of the OHSA. These focal aspects have a direct link to the central research question.

Finally, the researcher critically analyses the changes that OHS has undergone since 1994. This legislative framework is discussed in the beginning of the chapter because it

provides a basis for the research. Legislation has an effect on the OHS duties and responsibilities of management, as Bendix (1996: 86) puts it: “as circumstances (in the form of government legislation and other aspects of the socio-political milieu) change, management will develop by an evolutionary process”. Finally this discussion assess whether the South African OHS legislative system enhances the implementation of OHS in the workplace by management. This will be done by analysing OHS incident statistics provided by the ILO together with literature detailing the working experiences of the South African labour force.

The next aspect to be analysed are the events leading up to the development of collective bargaining and what its gains are in South Africa for employees and trade unions. The Labour Relations Act (1995) resulted in these significant gains. The analysis of the current state of OHS in South African workplaces, together with the attitude and actions of managers influencing these conditions follows.

The third aspect is an analysis of employee participation. A definition of participation is followed by a brief discussion of the prerequisites for successful participation initiatives being implemented. Then an outline of the obstacles to participative managerial programmes exists. Participation is a central aspect within a managerial framework because it is either approached from a managerial perspective or an employee perspective. In the former case, management is not concerned to identify their employees’ rights to express their views or more importantly to modify and influence the decisions made by management, posing various obstacles. In the latter case, management retains authority on all decision making processes. This has a direct impact on OHS in the workplace, as the level of participation by the employees is affected.

The fourth aspect highlights the significance of worker empowerment through management implementing training initiatives in the workplace. Workers need to be empowered to enhance their participation in the OHS systems and structures in the workplace. The benefits of training are outlined, followed by the argument that training be considered a more profound aspect of managerial roles and responsibilities.

The fifth aspect deals with the manner in which management shapes the involvement of the trade union in OHS matters. The purpose of the union is to promote, among others, the OHS interests of its members. The strategy that the trade union chooses to respond to management's practices must be one that promotes their participation in OHS and safeguards their interest in OHS. It is of primary importance that the trade unions' possess the potential to play a role in OHS in the workplace. Trade unions in many countries are a crucial source of OHS regulation in workplaces. Therefore, the manner in which they respond to the actions employed by management must have OHS as a central aspect. If the trade union is shown no regard by management, OHS issues are not going to be handled in an effective manner, as the trade union will have no influence over OHS.

Attention is focussed on the interaction between the efficacy with which management practices their duties, affecting the attitude and actions of the employees and the trade union. OHS will thrive within a managerial style that supports an equal partnership between management and labour. It is up to the parties to establish an industrial relations system which recognises conflict and co-operation, which seeks to achieve mutually acceptable settlements and which recognises mutual independence.

3.2 A BRIEF HISTORY OF OCCUPATIONAL HEALTH AND SAFETY IN SOUTH AFRICA

The legislative framework of OHS underwent changes during the 1980s. It is crucial to engage in a brief discussion of this background so as to gain an understanding of the possibilities and limitations of a restructured system. Through evaluating the past, we could pinpoint the weaknesses and develop a set of broad principles that could be put in place to regulate OHS in the workplace effectively (Macun and Meyers, 1991: 11-12).

There were limited concessions in the area of OHS due to the political situation of the 1980s. During the apartheid era, capitalism was experiencing a crisis in control, due to

the rapid growth of black independent trade unions within the country. These unions began to challenge the exclusive control of management regarding production and the terms and conditions of employment. At the 1983 conference of the Medical Association of South Africa Mr R.J Ironside, President of the Federated Chamber of Industries, urged management “to seriously view responsibility for health and safety before it becomes an additional area of conflict between management and labour” (cited in Maller and Steinberg, 1984: 63).

The Wiehahn Commission of inquiry was established in response to the growth of black independent trade unions during the 1970s. The protection of workers’ safety and health formed part of the Commission’s investigation. The recommendations that were made by the Wiehahn Commission however, were not as far-reaching as those made by the Erasmus Commission of 1975. The Erasmus Commission, called for extensive changes to the OHS system. Despite the Erasmus Commission’s ideological impact, only a few of its minor recommendations were implemented through legislation, as difficulty was experienced in putting them into practice effectively. Instead, the reformism of Wiehahn provided an important context and set of guidelines for change in the area of OHS (Macun and Meyers, 1991: 12).

The Erasmus Commission of Inquiry into occupational health found that industrial hazards and illness were widespread. There was a lack of managerial concern about this and workers had little say in their conditions of work. It was recommended by the Commission that managers should regularly consult workers about the hazards that exist in the workplace. It took eight years to introduce legislation that responded to the recommendations made by the Commission. This reflects the division in opinions within the Departments of Health and Manpower, as to how this potential area of conflict could be legislated for (Maller and Steinberg, 1984: 64). Legislation that was introduced assisted in asserting the employers prerogatives regarding health and safety matters. Its aim was to institutionalise such conflict, thus separating it from other areas of industrial relations. The Erasmus Commission was regarded as the industrial health arm of the Wiehahn Commission (Maller and Steinberg, 1984: 67).

A second significant factor was the shift from the Factories Act to the Machinery and Occupational Safety Act of 1983 (MOSA). The Factories Act of 1941 had as one of its aims the prevention of accidents at work. According to Burger (2006: 67) it was also aimed at providing regulation and control of factories, regulation of hours and conditions of work in factories more generally and supervision of the use of machinery. In 1967 a significant amendment to the Act was passed from the point of view of health and safety. A separate chapter was added, dealing specifically with the protection of health and safety of employees. Trade union demands at this time, in the arena of OHS, strengthened the case of those advocating factory reforms and hastened up its implementation. According to Simons and Simons certain aspects of the Act were influenced by the National Party and their Afrikaaner nationalist partners in the trade union movement. Working conditions therefore, favoured white workers (cited in Burger, 2006: 68). The 1941 Act introduced the principle of regulation and empowered the Minister of Manpower to make provisions on a wide range of subjects. Simons and Simons explain that “the minister was empowered in terms of section 54 to exempt managers from most clauses of the Act, making it difficult for labour to control conditions at work” (cited in Burger, 2006: 69). It was therefore, the effects of the Erasmus Commission that resulted in the Old Factories Act being replaced by MOSA.

MOSA had an aim of increasing worker involvement in health and safety. Self-regulation became more stable and stronger in countries experiencing industrial democracy and where trade unions were conscious and forceful in asserting their right to participate in OHS decision making (Macun and Meyers, 1991: 13). This was not the case in South Africa at that particular point in time. Individual employers at this particular time cared little for the health and safety of their employees. In the opinion of Budlender, a capitalist form of production “encourages the employer to extract the maximum amount of labour out of his workers in any given period, in that he can in this way appropriate more surplus value in proportion to the wage, the paid labour” (cited in Burger, 2006: 67). Individual employers therefore, minimise all expenditure including expenditure on safety equipment and improvements in the working environment, which

do not contribute to a direct improvement in output. Added to this, was the strain of MOSA giving management primary responsibility in establishing safety committees.

There is not much evidence to suggest any substantive influence by labour as far as the safety and welfare provisions of the Act are concerned. One of the many possible reasons for this is because organised labour did not substantially influence the legislation of the time, diminishing the potential for workers to exercise control over their working environment. Difficulties in gaining access to documentation on rules and regulations left workers in ignorance and meant that workers themselves could not insist on employers observing the law, but had to rely on state officials. MOSA did not include the provision of adequate training initiatives for health and safety representatives. The result was that OHS was not efficiently regulated. The primary criticism of MOSA was aimed at its pre-empting trade union influence over OHS. The Act also put in place a system that was easily dominated by management in which workers had no real say. Maller (1983: 48) outlines the reasons aptly: “MOSA, like the Erasmus Commission can be seen as an attempt by the state and capital to control trade union and democratic worker organisation around working conditions and to pre-empt worker demands that could adversely affect productivity and profitability”.

Although bargaining over health and safety was difficult in this environment, joint management – labour committees formed. The trade unions held the view that the purpose of these committees was to dilute their power because management dominated these committees and used them as a tool to enforce their ideas and objectives onto employees. When managers were reluctant to form these committees, this seemed to confirm the unions’ suspicions. Workers placed more trust in the unions and this resulted in the joint committee system losing its viability. The mistrust resulted from industrial relations being deracialised before politics became deracialised. According to Cyril Ramaphosa,

[n]ever before have workers been so powerful, so united and so poised to make a mark on society. We all agree that the struggle of workers on the shop floor cannot be separated from the wider political struggle for liberation in this country (cited in *The Shop Steward*, 2003: 2).

Workers were expected to trust white management inside the workplace, while they were experiencing racial oppression outside of the work place by the white government. However, the joint committee system persisted and played a role in the implementation of the safety committee system provided by MOSA. The Erasmus commission envisaged the establishment of joint safety committees consisting of representatives from management and employees. The committee would meet regularly to discuss OHS matters. The commission was of the opinion that employees should be able to elect their own representatives, although management decided on the constitution of the committees. However, the proposal constituted a symbolic change because for the first time in the history of South Africa's OHS legislation, there was some recognition that workers in the manufacturing sector should be entitled to involvement in health and safety matters at plant level (Macun and Meyers, 1991: 13). Workers now had a chance at participating in OHS matters that had a direct impact on them.

MOSA adopted the Robens Philosophy which emphasised self regulation. Self-regulation had two identifiable components. The first was at national level. It envisaged that legislation would enable the involvement of management and workers in establishing enforceable standards and developing an enforceable policy relating to health and safety. At the local level, it aimed to recognise the inherently conflictual nature of the relationship between management and employees, with the aim of consolidating the co-operation of managers and workers to enforce and meet the minimum statutory requirements of MOSA. This was to form the basis upon which improvements to health and safety would be made (Macun and Meyers, 1991: 14). In practice however, the organisational system introduced by MOSA, did not achieve its objective since it gave managers prime responsibility in establishing a safety committee and in deciding its composition.

The effectiveness of the implementation of MOSA was undermined by many factors, including the lack of data to show the achievements of MOSA and the apartheid workplace regime. There was also a lack of awareness and knowledge regarding the effectiveness of OHS programmes that were put in place in organisations during this

period. A lack of data also existed with respect to assessing injury and fatality rates over time, as an indicator of improved safety performance (Macun and Meyers, 1991: 16). It was hoped that with the introduction of democracy, the workplace would maintain and enhance its deracialised features. The implementation process of OHS legislation and policies was problematic.

As in the past, we are still presently experiencing a deficiency in accurate data relating to the evaluation of the implementation of the Occupational Health and Safety Act of 1993. Although we have a comprehensive set of laws, its implementation still produces challenges. There is an attempt to remove the prime responsibility of OHS from management and it has been broadened to include employees. It is important that we now question how much progress has been made from that point in time until presently. As legislation, trade union activity and strategies change, so do managerial practices also transform, providing the basis from where our progress in relation to OHS can be traced. Burger (2006: 75) summarises this aptly:

[i]n the early 1990s the political landscape in the country began to change, with the un-banning of political parties. This meant that the labour laws also had to be reviewed since the majority of South Africans were excluded from participating in the discussions and negotiations of the labour laws during the apartheid era. This led to the promulgation of the Occupational Health and Safety Act, which makes the health and safety structures in the workplace more democratic than before.

3.3 CENTRAL ASPECTS OF THE OCCUPATIONAL HEALTH AND SAFETY ACT

Sekobe cited in Burgess (2006: 34) makes evident that in South Africa, OHS issues in the workplace are governed by the Occupational Health and Safety Act 85 of 1993. Occupational health has been defined by the World Health Organisation (WHO) and the International Labour Organisation (ILO) as:

[A]ll the activities that aim to protect, preserve and promote the health and safety of the workers. If we add the meaning attached to 'health' by the WHO, viz: the physical, mental and social well-being of the individual, the total explanation covers a very wide area including

- Safety (accident prevention)
- Occupational medicine,
- Ergonomics,
- Anthropometry,
- Ecology, occupational mental health, and
- Supportive social services such as care of the aged and child care.

As industrial production sophistication increases, so will the list (cited in ILO, 2005: 1).

The definition of OHS has widened to include the reduction of the risk to safety and health. This is achieved by placing a duty on management to ensure that the equipment they introduce is designed and tested to ensure its safety. Management's responsibility is to establish safe work environments and work organisations through adapting work to workers, rather than workers to work. The definition of occupational health includes occupational hygiene. Occupational hygiene is defined as "the anticipation, recognition, evaluation and control of conditions arising in or from the workplace, which may cause illness or adverse health effects to persons" (OHSA, 1993: section 1). When an employee is healthy, according to the Act, they are "free from illness or injury attributable to occupational diseases" (OHSA, 1993: section 1). This creates obligations not only on managers and employees, but also on manufacturers, designers and importers of equipment. It further obliges management to protect those not in their employment, who are directly affected by the hazards of their workplace (OHSA, 1993: section 8).

This broader definition of OHS creates numerous institutional challenges. Inspection systems have moved away from only inspecting workplaces to inspecting imported and manufactured equipment prior to installation. The roles of workers, managers and the state have been reviewed. OHSA emphasises bipartite managerial and employee structures. These structures are used for the identification of hazards and the implementation of standards. This is geared towards providing appropriately recognised

duties and responsibilities for those at the workplace in identifying risk and ensuring safe work. Hence, OHSA clearly provides for information to be given to workers and their representatives on OHS risks and precautionary measures (Loewenson, 1996: 29).

The Act outlines the minimum roles and responsibilities of management and employees to ensure safety in the workplace. These include:

- Ensuring that the system of work, plant and machinery are safe.
- Any hazard or potential hazard should be removed, before providing employees with protective equipment.
- Making the necessary arrangements to ensure that the production, processing, use, handling, storage or transport of articles or substances is safe and do not pose any risks to the health of employees.
- Managers need to make employees aware of the precautionary measures that have been put in place to ensure the prevention of hazards.
- It is also managements' responsibility to provide information, instructions, training and supervision to ensure employees that their health is protected.
- Managers need to take the necessary measures to ensure that the requirements of this Act are adhered to by every person in their employment (OHSA, 1993: Section 8).

The minimum roles and responsibilities of employees include:

- Employees do not only have to take care of their own health and safety, but also of those who are going to be affected by their actions.
- The co-operation of employees with their employers is required regarding the carrying out of the requirements of OHSA.
- Employees need to carry out all lawful orders given to them by their managers relating to OHSA.
- Employees need to obey all the health and safety rules and procedures laid down by management.

- They should report unsafe or unhealthy working conditions to their managers or health and safety representative as soon as possible.
- If employees are involved in any incident, which may affect their health or result in their injury, they should report this to their manager or health and safety representative as soon as possible (OHSA, 1993: Section 14).

It becomes evident that OHS is not the sole responsibility of management as the employees also have duties under the Act. OHS in South Africa is attempting to align with international standards. Employees, in particular, are ostensibly enjoying more protection than they did in the past because of our OHS laws. We need to critically assess whether the law is being put into practice effectively in the workplace to ensure that the workers actually benefit from this increased protection. This point will be discussed further in later chapters.

Section 29 of the constitution provides that every person has a right to an environment which is not detrimental to his or her health or wellbeing. This environment includes the working environment. The constitutional right contained in section 29 cannot be seen as being an absolute right. An employee in terms of this constitutional provision, “has a right to a workplace that is as safe as possible - i.e. a workplace in which all reasonable precautions have been taken to ensure the safety and wellbeing of persons who work there” (Burger, 2006: 76).

Although legislative advances have been made regarding OHS, difficulties are still being experienced regarding certain aspects of the Act such as the phrase ‘reasonably practicable’. Researchers such as (Burger, 2006: 89) question how one should measure what is reasonable and who will determine what is reasonably practicable. A second weakness of the Act is its failure to offer an adequate procedure for the resolution of disputes over whether an instruction is reasonable or not, particularly in a case where the employee believes it would be dangerous to complete a certain task. There is an example of this in chapter four. A third weakness of the Act, according to Benjamin, is that “it fails to provide a satisfactory procedure in resolving disputes over whether an employers’

instruction is reasonable or not” (cited in Burger, 2006: 90). The consequent fear of disciplinary action makes employees cautious about disobeying management’s instructions, even when they seem unreasonable. Employees should have the right to refuse to obey unlawful orders if the consequences of such orders contradict their duties to take reasonable care of their health and safety and that of their fellow employees.

Managers and employees have been provided with rights and responsibilities. They need to bear in mind that with their rights and responsibility come accountability for their role in OHS. It is important that these two parties co-operate with each other to ensure that their responsibilities are successfully carried out in practice. It is for this reason that the parties should work towards supporting each other. Legislation alone cannot guarantee that OHS provisions will be implemented efficiently and it is therefore up to the parties to ensure that effective systems are put in place. The parties should work towards improving working conditions through ensuring the possibility of safe work environments. Many advances have been made to OHS after 1994. It is important to note that even though much has changed, even more has remained stagnant as will be noted in section 3.4. There are still many weaknesses in the implementation of the provisions of OHSA.

3.4 OCCUPATIONAL HEALTH AND SAFETY AFTER 1994

3.4.1 Collective Bargaining

After the demise of the apartheid government, the labour movement mobilised, broke through racial exclusionism, developed and reshaped the collective bargaining system and contributed to the introduction of democratic governance in South Africa. According to Sekobeng, the Congress of South African Trade Unions (COSATU), together with the African National Congress (ANC), developed policies with the aim of protecting the health and safety of those at the workplace. OHS policies’ were no longer only ‘management-friendly’ as attempts were now being made to include the views of those directly involved in the processes of work, i.e. the workers (cited in Anstey, 1997: 154).

Sekobeng again makes evident that in the Labour Relations Act of 1995, the labour movement enjoys a level of empowerment and protection not shared by many in more developed nations. Many of the rights so desperately fought for through strikes and court actions are now enshrined in law and collective agreements. OHS Act is constantly being reviewed and updated to ensure the utmost protection of the workers. New labour legislation is in place, empowering trade unions with the following rights to: associate, organise, strike, company information and with protection from dismissal for their members (cited in Anstey, 1997: 156).

Collective bargaining is said to be management and employees negotiating with each other about the terms and conditions of employment with the aim of reaching a collective agreement. A collective agreement over-rides any individual contract of employment. The Labour Relations Act of 1995 (LRA) makes provision for centralised collective bargaining. Groups of workers in the same industry or sector bargain with the employers in that industry or sector. The Act also allows for a collective agreement to be entered within an organisation between a trade union and management (Salamon, 1992: 309). According to Summers (1995: 809),

[I]do not believe that a society can be democratic, an economy can prosper and workers improve their life if management and employees see each other only as adversaries. Co-operation at the workplace in making work safer, more satisfying and more productive is essential and the collective bargaining system must be constructed to encourage that co-operation.

If employers are experiencing a problem that is covered by a collective agreement, and cannot reach consensus with the union, then the problem is referred to the Commission for Conciliation, Mediation and Arbitration (CCMA) or the bargaining council for conciliation and final arbitration. Bargaining council agreements set out terms and conditions of employment for a particular industry in a particular area. These councils are made up of representatives of employers and the trade union. The powers of the bargaining councils have been extended as it is similar to that of labour inspectors. This

allows them to provide compliance orders where employers are in breach of the council agreement (Unknown, 2006: 1).

According to Bendix (1996: 283) “centralised collective bargaining occurs when employers in a sector get together and bargain with one or more unions representing the employees of those employers”. Trade unions which are party to a bargaining council have organisational rights in all workplaces in that sector. To establish a bargaining council, the unions and the employers’ organisations must be sufficiently represented. Bendix (1996: 283) notes that the term ‘sufficiently represented’ is not defined in the LRA; therefore, it could be determined by factors such as:

- the degree of trade union and employer organisation in the sector and area of the proposed council;
- the nature of the sector;
- the number of employees employed by the members of the employer’ organisation; and
- the ability of unions and employers organisations to represent the different interests of employers and employees to be covered by the proposed council.

The functions of bargaining councils are,

within the undertaking, industry, trade or occupation and in the area in respect of which it has been registered to endeavour by the negotiation of agreements or otherwise, to prevent disputes from arising and to settle disputes that have arisen or may arise between employers and employers organisations and employees or trade unions and take such steps as it may think expedient to bring about the regulation or settlement of matters of mutual interest to employers or employers organisation and employees or trade unions (Salamon, 1992: 284).

Baskin (1994: 49) outlines four functions of collective bargaining. Firstly, it sets basic minimum standards as it can prevent sweat-shop labour, undercutting and it can set a minimum floor that is acceptable to society as a whole. Secondly, it provides more efficient ways of conducting bargaining. Instead of union officials travelling around the country to try and negotiate at plant level with the various managements’, there is a focus

on resources and the ability to allocate skilled officials to negotiations. Thirdly, centralised bargaining for the unions allows them to promote equality. In South Africa, decentralised bargaining will allow an increase in the strength of the trade union in larger, capital intensive and wealthier plants. The union will more than likely concentrate their efforts there. Without centralised bargaining, it would be difficult to promote issues relating to equality. Fourthly, a number of economies of scale emerge for management and the union from centralised bargaining. In decentralised bargaining, employees are likely to push for medical aid schemes, being problematic for management. Buying into private medical aid schemes is expensive and inefficient. With centralised bargaining management is able to develop benefit funds which are more meaningful and cost effective.

Fifthly, centralised bargaining increases the power of management and employees. Some managers and trade unions do not consider this to be an advantage. However, it is essential to increase the power of both parties, if there is to be a stable industrial relations system in South Africa. Currently, it is said that the parties are not yet strong enough to make the agreements or the level of bargaining stick with the result being increased labour unrest. Lastly, proactive unionism is thought to be essential for the unions. Without centralised bargaining, the union is pushed into defensive mode and they become reactive. On the contrary, with centralised bargaining, they have the ability to take a broader view of what is going on in terms of industry restructuring therefore, they are more proactive than reactive.

Since its founding congress, COSATU has been committed to playing an active role in the struggle for freedom in South Africa. COSATU, the ANC and the SACP, commonly known as the tri-partite alliance committee was tasked with finalising the Reconstruction and Development Programme (RDP) document and popularising it together with the ANC's election manifesto. The outcome of this process is well known. The RDP became a widely respected policy framework for the new government to follow. After the election, COSATU argued that the RDP was not only a policy document of the

government, but a programme to be implemented by all sectors of society. The result was that a platform of workers rights stemmed from this (The Shopsteward, 26 April 2003: 2).

All workers now had the right to join trade unions, they enjoyed the right to collective bargaining, to strike and picket on all social and economic matters and they had access to company information. The new framework for collective bargaining included centralised collective bargaining ensuring that work re-organisation was based on nationally negotiated frameworks (The Shopsteward, 26 April 2003: 2). Legislative and administrative reform was required to facilitate the above. Management was now obliged to ensure workplace empowerment through the obligation to negotiate major production changes and workplace re-organisation. Management was obliged to create facilities for organisation and communication with workers on economic and industrial restructuring issues. Management also had to ensure the right of shop stewards to attend union meetings and training as well as address workers without loss of pay. One of the many aims was enabling employees to have a greater say in the production process and ensuring that an integrated education and training system was in place, linked to economic and labour market planning. A further discussion of training is found later in the chapter. An extract of the speech delivered by Jay Naidoo at COSATU's special congress reminds trade union officials that

[t]his team you have elected is to represent not just the narrow views of the trade union movement, but the interests of the whole working class. Leadership must never be allowed to act in their own personal interests. They must act in the interest of those around them. But for this, you will have to keep the unions strong (cited in The Shopsteward, 26 April, 2003: 3).

A summary of the RDP was adopted as a working document by COSATU. The democratisation of the state was called for, by saying that the state must be efficient, lean, accountable, accessible and responsive to the public. The union wanted to build a new economy by plotting a path to their achievement of growth, creating jobs, meeting basic needs as well as redistributing incomes, wealth and economic power. The state was to play a leading role in co-opting the involvement of the trade unions. New industrial policies and improved investments were to be negotiated to ensure integration into the

world economy, without the need to protect local industries. Competition was to be improved by banning monopolies. A living wage linked to skills was to be a basic policy. Through all these endeavours, it was anticipated that co-operation would be forged with the rest of Southern Africa (The Shopsteward, 26 April, 2003: 4).

It aimed to alleviate poverty by providing housing, community facilities, and basic affordable services, improved transport, primary health care, a national health service and a national security service system. Prices of food and goods were to be kept affordable. It is for this reason that a comprehensive centralised bargaining system is fundamental for tackling the major economic issues facing South Africa such as wages, productivity, incomes policy, wage differentials, training, the social wage, job creation and even taxation and investment. Hence, a centralised bargaining foundation is essential (The Shop Steward, 26 April 2003: 4).

The LRA is said to be a significant milestone on the path towards post-apartheid South Africa, as it concerns the transformation of power relations and strengthens the unions' co-ordinating capacities and organisational resources. These are central determinants of the content and scope of issues subject to negotiation. The trade union saw centralised bargaining as a means of rationalising their bargaining activities, increasing their membership and expanding their influence. For the state, centralised bargaining represented an institutionalisation of conflict and a counter to bouts of industrial unrest and a mechanism for promoting industrial co-operation (Uknown, 2006).

Centralised bargaining, according to Klerck (1998: 98-99), is important in developing countries, especially where training is top priority. If training agreements are not industry wide, there is not much of an incentive for management to devote resources to training. If they do invest in their employees, there are no guarantees that the trained employees will not be poached. South African employers during the 1980's favoured centralised bargaining, as the labour movement was weak and they lacked the resources and the commitment to sustain industry-wide bargaining. The bigger unions realised that centralised bargaining allowed them the opportunity to extend their influence throughout

the industry and cover firms where its shop floor presence is weak. Centralised bargaining in South Africa has been limited in scope. In most cases it was simply used as a framework to establish minimum wages and working conditions. When employees agree to centralised bargaining, it is not done in the spirit of co-operation or in an attempt to increase the influence of the trade union. As Klerck (1998: 98-99) aptly puts it “for employers, centralised bargaining is simply a means to an end: the business of business is business”.

In the view of Salamon (1992: 345), worker participation is complimentary to collective bargaining if implemented effectively. It increases the quality of decision making, facilitates organisational change, improves the climate of industrial relations, increases job satisfaction and improves the public image of the organisation. Worker participation is introduced for reasons including the belief that employees have a right to participate in decisions which affect them. Management recognition of the collective power of the employees in their workplaces and the direct activity of the trade unions pushed management towards greater participation initiatives. Management was also feeling the pressure from the political system to adopt more participative managerial arrangements. Participation has an aim of bridging the gap between the role of management and employees by establishing forms of interaction through which workers may take part in functions defined as managerial. One way is through joint-consultation with safety representatives and collective bargaining.

Direct participation according to Salamon (1992: 347) allows employees to be actively and personally involved in the decision making process. Indirect participation restricts employees to a relatively passive role. Employees rely on their representatives to carry out the active role of discussing and deliberating with management on their behalf. Indirect participation encourages the content of collective bargaining to be widened and allows for the establishment of bargaining councils. It also focuses attention on the exercise of managements' prerogatives, therefore attempting to balance the power between management and employees in decision making processes. Indirect participation can be said to be power centred. It seeks to protect the interests of the employees by

extending their collective influence into a wider range of decisions at higher levels of the workplace. The initiative for such a development may come from the unions and the employees because of the extension of collective bargaining. Direct participation is therefore, concerned with extending the influence of the employees through processes of negotiation and joint regulation. The existence of participation depends on how far employees are able to influence management thinking and contribute to the determination of decisions. Participation is dealt with more extensively later on in this chapter.

3.4.2 Occupational Health and Safety in the Workplace

With the introduction of democracy, it was hoped that management would make the health and safety of their workforce a priority. While we have made great progress regarding our OHS legislation, we remain stuck in the implementation process of this legislation, as we were during the 1980s. This point is aptly stated by Mpolokeng (2001: 1) as she argues that:

[we] are emerging from the legacy of apartheid labour market, under which apartheid management cared little about the health and safety of their employees. Since the advent of democracy, there has been progress with new legislation on health and safety at work. While we have made important strides at the level of legislative reform, the sad reality is that health and safety at work is still not regarded as a priority.

Since 2003, an annual commemoration for World Day for Safety and Health at Work is celebrated on the 28 April. The aim of the celebration is to focus international attention on promoting and creating a safe and health culture at work to reduce the number of work related deaths. More than 6000 workers die daily as a result of accidents in the workplace or occupational health diseases (International Labour Organization, 2005). Hence, OHS problems in the workplace, as well as the role of management in creating and maintaining safe workplaces is worthy of research attention. There is also a lack of published empirical research regarding the effectiveness of management in ensuring safe working conditions in South Africa. This suggests that there is little known about this area.

The most valuable asset that humans have is life. Any act that results in the squandering of human life should be avoided. It is a stark reality that the world of work today is not a safe place. Our Minister of Labour, Membathisi Mdladlana, noted in his speech at Injaka Bridge on 7 May 2004, that the world of work “is a world where more than 2 million people die from work related accidents and diseases every year” (Department of Labour, 2004). Dangerous and hazardous conditions still prevail in the workplace. It has been estimated that 160 million workers contract diseases every year as a result of their exposure to workplace hazards (Department of Labour, 2004). In the developing countries the situation is more frightening with estimates of a six times higher death rate of workers compared to their industrialised counterparts (Department of Labour, 2004). South Africa has its own share of this tragedy. Occupational accidents and diseases cost South Africa in the region of 3.5 percent of the Gross Domestic Product (GDP), which translates into about R30 billion (Department of Labour, 2004).

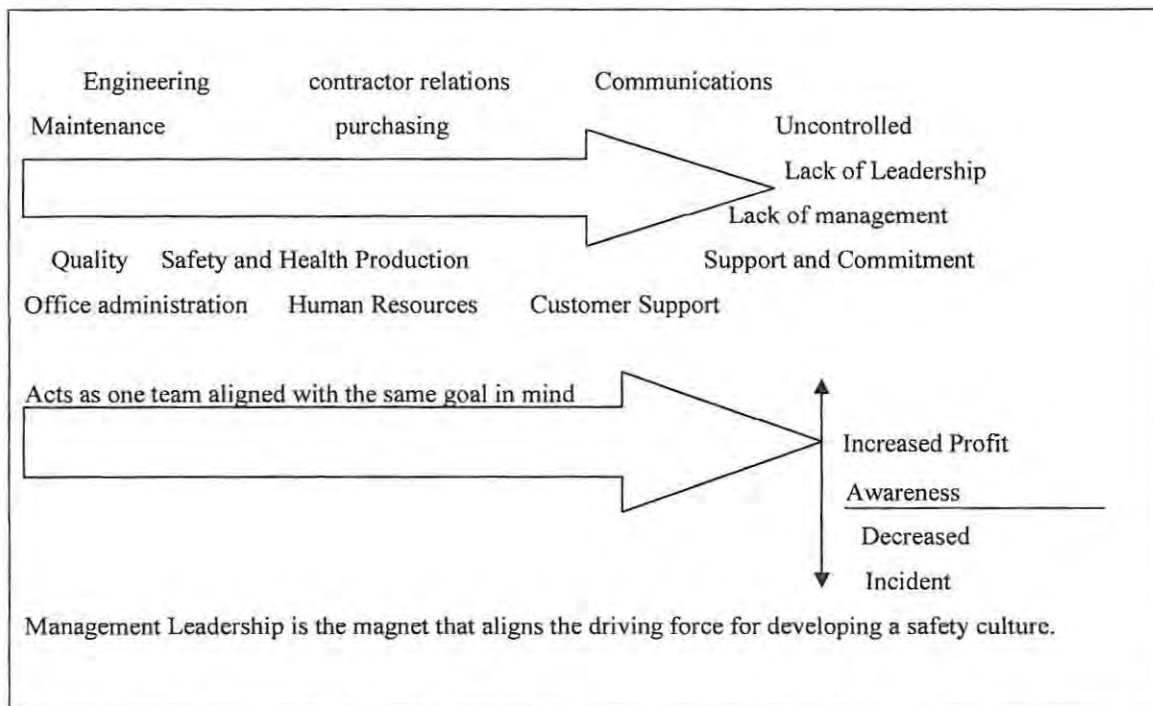
The ILO estimates that some 2.2 million women and men around the world succumb to work-related accidents or diseases every year. Nearly four-fifths of this number is due to work related diseases (ILO, 2005). Worldwide, there are about 270 million occupational accidents and 160 million victims of work-related illnesses annually. According to the ILO, deaths due to work-related accidents and illness represent 3.9 percent of all deaths and 15 percent of the world population suffers a minor or major occupational accident or work-related disease in any one year (ILO, 2005: 7). In 2001, sub-Saharan Africa had an economically active population of 279.5 million people. There were 53 500 fatal accidents in 2001. Accidents resulting in absenteeism amounted to 40.5 million and there were 265 000 work-related deaths (ILO, 2005: 7).

South Africa has well-developed occupational health and safety laws, but there seems to be considerable difficulty in putting it into practice effectively. According to Nel (2002: 77) increased worker participation should be encouraged “through processes such as communication and information sharing, consultation and participation ought to become an integral part of the management of South African organisations”. This could be achieved, in part, through the effective implementation of health and safety committees. Employees are

always going to have their own ideas, views, experiences and suggestions that could be used to build on management structures that already exist. This could help ensure greater success in the development of an effective occupational health and safety policy (Roughton & Mercurio, 2000: 41).

Figure 3.1 provides a graphical view of an effective leadership model. The diagram shows that managerial leadership is similar to a magnet that aligns the drive force for developing a safety culture. If the management system is not aligned, part of the system will not work, resulting in the safety culture failing.

Figure 3.1: Leadership Model



(Source: Roughton and Mercurio, 2002: 65).

Membathisi Mdladlana, the Minister of Labour, quoted Juan Somavia, Director-General International Labour Organisation, in his speech at the annual Safety and Health at Work Commemoration saying:

[a] safety culture must be nurtured through partnership and dialogue between governments, employers and workers within a framework of rights, responsibilities and duties, finding common ground, creating safe and healthy workplaces. I strongly believe that this is one of the most fertile areas for reaching consensus in the world of work.

Health and safety is a subject of conflict between employees and managers. Management is characterised as having the aim of avoiding expenditure on the parts of the production process that do not result in direct profits. An example of this is the reluctance of managers to spend money on improving lighting or ventilation in the workplace. Health and safety is paid for out of profits and it is seen by some employers as being “an extra that managers may or may not decide to purchase, rather than an integral part of the way work is done” (Maller and Steinberg, 1984: 61).

Within the arena of the competition for investments, the state is placed under pressure to create an attractive environment for profits and investment (Ahwireng-Obeng and Akussah, 2003: 30-37). The general trade-off is between health and safety on the one hand and profits on the other. In this instance, OHS is the first aspect of the workplace, where budget cuts are experienced. It is for this reason that tensions exist between improving working conditions which increases the costs of production and maintaining and extending levels of profitability. The creation of a healthy and safe workplace implies a concern for and commitment to the physical and psychological well being of the workforce, rather than a primary and exclusive concern with profits (Maller and Steinberg, 1984: 63). This results in positive outcomes for management and the workplace. According to McGregors’ Theory of Y, people want to obtain satisfaction and achievement from their work hence, employees’ possess the capabilities of assuming responsibility, generating self motivation and self control (cited in Salaman, 1993:358). Research demonstrates that employee motivation and satisfaction is dependent on numerous factors, including those of a psychological nature. The demand that work be made safe and healthy implies a challenge to the system of production that puts profits before human needs (Maller and Steinberg, 1984: 62). In the 1980s the slogan for COSATU was ‘health before profits’.

As made evident in this section, many managers are still trying to downplay their responsibility for health and safety, by cutting out the costs involved in providing healthier and safer working environments. In the words of Roughton and Mercurio (2002: 107), “a company without a health and safety management system in place, is rejecting responsibility and perceives safety as being just another thing that has to be done”. The issue of safety seems to be on a list of priorities that constantly changes. Safety is not emphasised as it should be. Incidents are seen as being a mere cost of doing business. Safety is often compromised in favour of production, quality and other demands on the business. The planning process of this type of organisation, regarding OHS is short-term, rather than long-term. The process could also be described as being reactive to problems regarding OHS, rather than proactive. The only type of communication in the organisation is top-down: from management to employees (Roughton and Mercurio, 2002: 17). There is minimal participation by employees in decision-making and the relationship between managers and employees is adversarial.

The society in which a workplace functions, expects that management will comply with certain requirements to ensure a safe and healthy work environment for its employees. Before democratic governance, employers’ neglected health and safety requirements, resulting in poor working conditions. The state intervened by strict legislation, to ensure that managers complied with these expectations. Today, it is widely acknowledged that a safe and healthy work environment will ultimately contribute to greater productivity and output therefore, resulting in a higher standard of living. Health and safety issues relate to both parties of the employment contract. The employee would like to provide services to management in a safe and healthy environment and be assured that he or she will not be exposed to the extreme risk of accidents occurring. Managers would like to reduce the risk of accidents because of their costly nature and the negative effect they have on the employee morale of the workplace. Therefore, OHS definitely has an effect on sound labour relations and industrial relations in a company (Slabbert, 2000: 10-20).

COSATU supports the new laws passed on OHS by the democratic government. OHS is the unions' key weapon in ensuring that managers regard health and safety as a key priority (Mpolokeng, 2001: 2). Unions are aware that the law will not automatically provide their members with healthy and safe work environments. It is the duty of workers and unions to ensure that managers make safety a priority. Shop stewards have a duty to take stock of their workplaces to assess their safety and together with the union leadership, design strategies to ensure managerial compliance with the health and safety legislation.

In essence, managers have to ensure the safety of workers in the best practicable manner, rather than the most reasonably practicable means. Despite these problems, the system as it now exists will be the basis for new developments and improvements. We need to question how we can build a strong system on a foundation with obvious cracks and flaws. Changes that the government intends to make to OHS regarding its implementation and regulation are positive, but still require the co-operation of all parties. It is evident that the struggle for a safe work environment has a long way to go. Management and workers need to work as a team in order to achieve a jointly agreed objective. The OHS practices of management need to be thoroughly examined, with the aim of discovering their strengths and weaknesses. Managements' implementation of an effective evaluation and monitoring policy will benefit the OHS system in the company.

3.5 MANAGEMENT AND OCCUPATIONAL HEALTH AND SAFETY POLICIES

Salamon (1992: 450) notes that the definition of a policy is "a statement of objectives and a strategy of how you would achieve them". A useful distinction to make is between a company's industrial relations policy and specific policies. The industrial relations policy is defined as the company's philosophy or style towards the employees and how it conducts industrial relations affairs. Therefore, the industrial relations policy and the specific policy, such as the OHS policy, outline the objectives together with the approach

that is to be adopted by management when they are confronted with specific issues relating to OHS.

The definition of a procedure can be said to be an operational mechanism that details and regulates the manner in which a specified issue is to be handled. Procedures allow the policy to be implemented and ensure that the objectives contained in the policy are achieved. In instances where procedures are determined through negotiation between management and the union and involve employee or union representatives in their operation, they represent a system of joint regulation by providing a body of rules which defines the extent and manner in which managerial and trade union power is to be exercised within the workplace (Salamon 1993: 453). This has already been referred to in section 3.4.1.

It is suggested by Marsh in Salamon (1993: 158) that the manner in which management approaches its employee relations activities is related to policy – i.e OHS policy and their philosophy. A clearly defined company policy is fundamental to the development and maintenance of an orderly approach to industrial relations in the workplace. The primary purpose is to provide a clear statement of the industrial relations objectives. This promotes consistency in management and enables all employees and their representatives to know where they stand in relation to the company's intentions and objectives (Salamon, 1993:159).

In order for a company's safety policy to be effective Sekobe argues that its provisions need to cover the following:

- The extent of the responsibility of the manager who has the over-all responsibility of OHS.
- Determining what the objectives of the policy are.
- Determining what the responsibilities of the different managers are in order to achieve the key objectives of the policy.

- Determining which manager takes over the responsibility of OHS in the absence of the manager with the over-all responsibility.
- Determining which manager will have over-all responsibility of OHS.
- Management needs to decide on the parties that are going to sign the policy – i.e (OHS policy).
- The manner in which the policy is to be reviewed needs to be determined.
- The practices and strategies regarding the manner in which it will be communicated to the workers needs to be outlined (cited in Anstey, 1997: 294).

The effectiveness of a safety policy is measured by its usability. Companies that are successful in implementing effective OHS structures, ensure that workplace safety is incorporated into all functional areas of the operation (Roughton and Mercurio, 2002: 71). This commitment influences the actions of all managerial lines positively as they will realise that their safety is top-management's priority. The commitment of all levels of management is the ultimate determinate of the effectiveness of a management-inspired health and safety system.

Roughton and Mercurio (2002: 71) state that the hallmark of every successful management-led OHS system is top management's active and aggressive commitment to the safety process. In this instance, top management refers to the managers of the safety department: the plant engineer, the environmental specialist and the safety specialist. This line of management and their team implement the OHS management policy and systems in the plant. Their commitment can be demonstrated through the effectiveness of the OHS programmes and systems that they put in place. Top management needs to ensure that these systems and programmes are being implemented as planned by the various production managers. Top management's commitment is communicated through a health and safety policy that is clearly written and communicated. Such a policy stresses the value of providing a safe workplace that will protect employees (Roughton and Mercurio, 2002: 72).

The most comprehensive systems can never be flawless, as employees and management find loopholes to absolve themselves of their responsibilities. This is made evident throughout the chapters to follow. The OHS policy should be accessible to all employees. It clarifies the safety expectations of management and employees and creates continuity and consistency in expectation. By doing this, all levels of management will be supported in their role regarding their health and safety responsibilities. Ultimately, it describes the fundamental belief that safety is held as a business value rather than a priority (Roughton and Mercurio, 2002: 73). This is consistent with a management system that promotes two-way communication between management and their employees. The employees' views regarding health and safety are incorporated into the policy therefore, ensuring that they are part of the organisational fabric, as Storey and Sisson (1993: 8) note.

Management is recognising that their most important resource is their people therefore; ensuring the health and safety of their employees is a key factor to the company's success. Managers are taking active responsibility for caring for their staff and shop floor workers' health and safety by making it a key factor of their corporate strategy. This will become evident in all the chapters to follow. This is the reason for management placing so much emphasis on OHS as well as OHS training as chapter six makes evident.

Employees are expected to ensure their own health and safety as well as that of their fellow employees. This is in line with the country's OHS legislation. Management understands that guaranteeing the involvement and the commitment of their employees in relation to OHS, is a key factor to the success of the OHS management policy provisions. However, as we have already mentioned employees are sceptical of participative initiatives, as they are viewed as a control mechanism for management to tap into the views of employees. Management does not always take cognisance of the concerns or suggestions of the employees regarding OHS. This is evident in chapter four. Management believes that all their employees should strive to maintain optimal safety, health and environmental standards. However, as we shall show in chapter six, management is faced with numerous challenges in their attempt to provide OHS training.

Managers also have a role to play through setting up OHS structures. This results in companies experiencing added strain because of the need to have sound OHS and environmental standards. Often, the cost of implementing OHS structures becomes the focus of management rather than the long-term benefits. This is made evident in section 6.3, as management emphasises that their core business is production and therefore, their aim is to make a profit. OHS is often seen as an extra expense for management that they can choose to buy into or not. Although the relationship between management and employees is inherently conflictual, they need to develop relationships through sharing information and being transparent. Their relationship will be enhanced through participative decision making, reflected in their OHS managerial strategies and the OHS policy.

The real issue that needs to be addressed however is the reason behind management's low commitment to OHS. Management has an aim of increasing profits through maintaining the effectiveness of the production process. Production is their core business. Ensuring the OHS of the workers was not seen to be a priority in the past and this mentality has undergone a minor transformation presently. Although workers are receiving more protection from our comprehensive OHS legislation, there are obvious problems in its implementation.

It is important to note that there are barriers to the development of an effective OHS system. These barriers are the direct result of managerial attitudes and behaviours, resulting from the manner in which they choose to manage their labour force. The specific practices that managers choose to manage their labour force with, will have a direct impact on implementing the health and safety policy provisions that is in place in the organisation. Researching the reasons why management is neglecting their role in OHS, will result in the opportunity to tackle the reasons head-on and provide strategic solutions for the problems that these barriers pose. Table 3.1 mentions four barriers that prevent management from developing an effective safety culture and devaluing their role in OHS in terms of their legal obligations.

Table 3.1: Management Attitude and Behaviour Barriers

- *Inconsistency.* This week, the supervisor is intent on production at any cost, but at last week's safety meeting, she stated that safety was the company's top priority. Note: There is no mention of safety as a value.
- *Obsolete rules and procedures.* If rules are unclear, outdated, or inappropriate, employees tend to ignore them, finding ways around the requirements.
- *"Us" versus "them" thinking.* Unresolved past conflicts, combined with current stresses, are powerful forces that can encourage non-compliance.
- *Leadership deficiency.* When supervisors and other leaders fail to follow a safety protocol, they lose credibility as a role model.

(Source: Roughton and Mercurio, 2002: 53).

The first barrier is the inconsistency of management towards OHS. OHS is not a fixed concern for management. Their priorities change constantly, as in the example provided in the table. In the previous week's safety meeting, production was prioritised rather than safety. In the following week's meeting, safety was management's top priority. The second barrier is obsolete rules. Management may implement new rules, without first discarding of the old ones. This results in the rules being unclear, outdated and inappropriate. These rules are also not effectively communicated to the employees, resulting in them not having a clear understanding of the rules and their provisions. Managers tend to ignore the rules and find ways of creating loopholes so that they can work around the requirements of OHS. Management may also have an 'us- versus-them' attitude to their relationship with employees, especially the trade union. This relationship is inherently conflictual and adversarial. Management and employees do not have the same perceptions of OHS resulting in continuous disagreements. This is evident in section 3.6.

The final barrier is management's deficiency in leadership skills. Being in a managerial position does not necessarily mean that the individual has well-developed leadership capabilities. Management is supposed to model the appropriate behaviour regarding OHS, but often they fail to follow the safety protocol, resulting in them losing their credibility as role models. Workers may then start questioning why they should adhere to the safety protocols if their managers are not (Roughton and Mercurio, 2002: 54-55).

It is important that managers create opportunities for employees to have a certain degree of participation in OHS matters. This will ensure that the OHS values of management will be reflected through the actions of the employees. However, there are many obstacles that prevent management from introducing such participative initiatives. The positive and the negative aspects of these schemes are outlined in the next section.

3.6 EMPLOYEE PARTICIPATION

3.6.1 Interpretations of Participation

According to James and Horwitz (1992: 6) there are three forms of participation. The first being pseudo participation. Here, items are discussed but the input from the one party is excluded in decision making. This is seen as being manipulative. The second is partial participation. In this instance two or more parties influence each other in decision making processes, but the final power to decide only rests with one party. The third is full participation. Here, both parties determine the outcome of a decision.

According to Salamon (1992: 340) there are three distinctly different interpretations of participation. A socio-political concept or philosophy of industrial relations is the first. More than often, this concept is termed 'worker control' or 'industrial democracy'. The approach has an aim of changing the existing balance of industrial power and creating a system which involves employees in all decision making processes in the workplace. The ultimate objective is allowing employees to manage themselves. The achievement of such

employee participation requires a complete change in the economic authority relationships within workplaces and society at large.

The second is a generic term, used to encompass all processes and institutions of employee influence within the workplace. Participation according to Walker exists “whenever those at the bottom of the enterprise hierarchy take part in the authority and managerial function of the enterprise” (cited in Salamon, 1992: 230). In this form, employees have the ability to become involved in more than one aspect of the organisations decision making processes. Employees can be allowed to participate individually or collectively. On this basis, employee participation begins with the inception of the trade union. Provision is made for information to be shared between management and employees through the process of joint consultation, collective bargaining and other forms of joint regulation used to control employees.

The third is a discreet term denoting the vague, but distinct evolutionary development of the traditional joint-regulatory process. The aim is to promote greater employee influence within the existing system. It is important however in this approach, to differentiate between employee participation and other regulatory processes. This according to Salamon (1992: 341) can be done in two ways which are:

1. In order for a process to be participative, employees or their representatives must not only receive information, they must also possess the ability to influence decisions either by changing them once they have been made or jointly determining them with management in the first place. There must be full participation rather than pseudo participation, as management and employees must have equal power to determine the outcome of decisions.
2. Participation must also be differentiated from collective bargaining. This is done through emphasising the involvement of the employees in the decision making process, which traditionally is the prerogative and responsibility of management. Hence, the union should be provided with added responsibilities through management sharing some of their decision making with them. This approach to

participation can therefore be defined as “ a philosophy or style of organisational management which recognises both the need and right of employees, individually or collectively, to be involved with management in areas of the organisations’ decision making beyond that normally covered by collective bargaining” (Salamon, 1992: 342).

In 1980 there was a change from participation to involvement. Employee involvement was defined as “measures introduced by management intended to optimise the utilisation of labour and at the same time, secure the employees identification with the aims and needs of the organisation” (Salamon, 1992: 342). There is a significant difference between involvement and participation. In summary, involvement enhances the support and commitment of the employees to the objectives and values of the organisation, as determined by management. Participation is designed to provide the employees with the opportunity to influence and take part in organisational decision making.

Employee participation can be defined as a process through which workers are able to take part in and influence managerial decisions that may affect them in the workplace (Nel, 2002: 77). Storey and Sisson (1993: 230) note that workers are seeking jointly agreed procedures, as well as the ability to communicate through the trade union regarding health and safety matters. According to Purcell (1981: 11) the building of jointly agreed networks of rules and procedures is the best way of coping with conflicts that might arise. The extent to which employee and union representatives should be involved in discussions about company policy, depends on whether management regards it as solely an expression of their objectives for the guidance of employees. If management expresses a desire to increase employee participation in the company’s decision-making, a good point to start at is the determination of the content of the industrial relations policy. Regardless of whether employee or union representatives are involved, there is a need for the policy to be communicated to all employees so that they are aware of and able to access managements’ intention. If a company policy is to achieve its purpose, it should be set out in a formal written document (Salamon, 1993: 460).

3.6.2 Main Pressures for the Development and Extension of Participation

Salamon (1992:342-345) identified three of the main pressures that resulted in the development of employee participation initiatives in the workplace. These are outlined as:

1. The period between 1960 and 1970 can be characterised as one of economic prosperity where employees enjoyed stable and secure employment. There was also an increase in knowledge and awareness owing to education and mass media. This resulted in employees being more prepared to question established values, attitudes and institutions.
2. Developments in the industrial sphere resulted in the aspirations of employees increasing. The increased size and the complexity of industrial organisations contributed to the alienation of employees from their work. Industrial power and major decision making was concentrated in the hands of management. Managerial emphasis on the division and specialisation of labour to improve efficiency and productivity reduced the employees' identification with the end product produced by the organisation, as well as the organisation itself. The result was that there was a move away from the legal and economic aspects of the relationship towards psychological and sociological aspects.
3. Technological, industrial and economic change was also a factor of pressure. Organisational change has the ability to be carried out more effectively with the active and full participation of the employees rather than with management making decisions alone. Involving employees in decisions that affect their working lives, contributes to their knowledge and experience, improving their work practices. Through joint-analysis, the commitment to solve organisational problems will be affirmed.

3.6.3 Implementing Participative Initiatives

In the view of Salamon (1992: 350) the trade unions had a contrasting view of participation. They did not all agree that participation is a good thing as there are significant differences in respect to its intended objective. Management's view was that participation is based on the perception of consensus. This view assumes that the workplace has a community of interests between management and employees. The primary purpose of participation they believed was to achieve a greater commitment of all employees to the definition and attainment of the objectives of the enterprise. The emphasis of management's approach to participation is improving organisational harmony, efficiency and productivity.

The union in the opinion of Salamon (1992: 350) holds the view of the workplace as being pluralistic, as there are sectional and competing interests which have to be formally regulated on a joint basis. The union places emphasis on participation as a means of sharing power and providing employees with greater influence in the organisations decision making, through the enhancement and strengthening of the existing representational systems, particularly collective bargaining. The union therefore challenged the managerial notion of participation, specifically referring to organisational consensus as a basis for developing participation. Mutual inter-dependence is not found in many organisations as a result of the inherently conflictual nature of the relationship between management and employees.

Management has the primary responsibility for implementing participative initiatives. The inherent danger in this is that some managers assume that their definitions and their solutions are acceptable to all parties in the working environment. Management may initially want to limit the process to the provision of information, consultation or establishing direct forms of involvement. Examples of direct forms of involvement are formal and regular briefing groups as well as consultative meetings that take place

between management and the employees. This type of participation is determined by management ultimately for their benefit. However, an important distinction must be made between communication practices and involvement because communication is not involvement (Salamon, 1992: 352).

A survey conducted by the Department of Employment on employee involvement initiatives discovered that 42 % of these practices are actually communication meetings with employees (cited in Salamon, 1992: 352-353). Examples of these are company magazines, newsletters, notice-boards and line management communication meetings. These practices relate to communicating to the employees rather than involving them. Management introduced these as a means of securing employee involvement, as it created a general cascading effect of two way communications between management and employees. This gives employees some influence in decision making and it marginalises the role of the union because it allows management an opportunity to explain its problems and solutions and gain employee acceptance and commitment and provides line managers with the ability to pick up concerns and grievances at the earliest opportunity (Salamon, 1992: 352-353).

3.6.3.1 Prerequisites for participation

According to Williams (cited in Salamon, 1993: 352), it is important that management, employees and the trade union identify their differing expectations of participation. The objective of this is to develop an agreed and accepted approach. Management must also ensure that the prerequisites for successful participation have been put in place. Managerial commitment is one of these. Managements' commitment must not only be stated in the policy, but also in their principles and their decision making processes. Management must reject the belief that because of their professional and technical expertise, as well as their access to relevant information they have the ability to make objective decisions and that employees are unable to do this successfully as they lack the full capacity and understanding.

Hence, managements' commitment to training must be firm as all the parties involved in participation require specialised training. The introduction of participative arrangements does not result in an instant transformation in attitudes and behaviour. It has rather been described as a gradual evolution. In the words of McCarthy and Ellis, "management should accept from the start that within a system of management by agreement there would no longer exist, any area of management decision-taking where management itself could claim an absolute and unilateral right to resist union influence in any form" (cited in Salamon, 1992: 353).

Management also has to recognise that their relationship with the employees is inherently conflictual. An example of this according to Hirschsohn (1995: 21) is the management and the trade union at Volkswagen South Africa (VWSA) as they firstly, recognised that their relationship is inherently conflictual. This would affect the participative initiatives implemented by management because the two parties had differing views of the objective of participation. Management also recognised that negotiations would take place between strong representative groups. This form of participation was based on "a high level of shop steward involvement as well as a system of prior consultation, negotiation and compromise which recognises the power reality between the two parties" (Hirschsohn, 1995: 21).

3.6.3.2 Participation as an organisational strategy

When managers introduce employee participation initiatives, it is an organisational strategy. Hence, it should not be left to the discretion of individual managers. Managers are able to undermine the process of participation by providing employees with insufficient information or time to allow for effective participation. Supervisors and lower management are threatened by the development of employee participation as they feel that their authority and decision making is being transferred to the employees through direct participation. They feel that they are being bypassed through indirect

participation, through the involvement of the shop stewards or employee representatives meeting and discussing issues with senior managers. To overcome this, managers need to ensure that participation is not confined to just workers, but also that it includes all levels of management (Salamon, 1992: 353). An example of this is the Toyota manufacturing plant changing their work organisation in order to implement participative initiatives. Hirschsohn (1995: 23) notes that previously, management was traditionally authoritarian. The aim of these suggestion and participatory schemes was to enhance quality and productivity within the plant. Management soon lost interest in the programmes, resulting in a decline in participation and its principles were no longer part of managements' daily production routines. Employees too refused to participate in these schemes as their ideas were not considered by management.

3.6.3.3 Allowing time for participation

An argument used by management against employee participation mentioned in Salamon (1992: 354) is that often, there is not enough time to involve the employee representatives before a decision has to be made. Involving employees, increases the time in which decisions have to be made. On the contrary, if employees are involved in the decision making process generally and time constraints do pose a challenge resulting in management making the decision without the full involvement of the employees, the decision is more acceptable to them. Exceptions like this are more easily accepted by the employees if they are generally involved in decision making. The over-all processes of decision making do have the ability to improve managements' credibility.

3.6.3.4 Advantages of participation

The involvement of all employees in the health and safety management system is an effective approach that can be used to ensure the development of an effective safety culture. There are many advantages to encouraging the participation of employees in OHS matters. Advantages that should be mentioned are that it promotes the employee's awareness of OHS matters and how the decisions that are made regarding OHS affect

them. It also instils an understanding of the nature of managerial systems regarding OHS. This allows employees to own part of the system through their active involvement and experiences of OHS. Through them having a sense of ownership over OHS, it will encourage them to take more responsibility for matters regarding OHS. The time that they invest in health and safety will provide them with intrinsic rewards, as they will be able to see the benefits of performing safe work. It is crucial to bear in mind that employees are valuable problem-solvers because of their closeness to the action of performing work. According to Roughton and Mercurio (2002: 17), “no one knows the job better than employees”. The central role of employees in OHS is fully provided for in the law, but it is not effectively implemented and practiced by management (Roughton and Mercurio, 2002: 17).

3.6.3.5 Recognising the difficulties in implementing participation

Employee participation can be strengthened through the process of collective bargaining. Participation is seen as being the basis to extend collective bargaining as it increases the range of issues on which negotiations would take place. Through implementing participative initiatives, management is affirming their willingness to compromise, resulting in collective bargaining as a form of employee participation being more effective. Where employee participation is implemented in forms additional to collective bargaining, it is necessary to define the boundary between these two processes. In practice, the delineation between employee participation and collective bargaining must be flexible and reflect the complimentary rather than competitive nature of the two parties. Collective bargaining is based on the assumption that management has a role to draft policies and initiate changes to these (Salamon, 1992: 353).

The role of employees is to react to these policy proposals of management and when necessary, amend them through negotiations. Shop stewards have a role of reacting to the initiatives of management based on the concerns and suggestions of their members. They are therefore, uncertain of their role in participation, as at times it may seem that they are party to management's decisions, due to the compromising position participation puts

them in. The trade unions' independence depends on their right and ability to oppose management. It is for this reason that they feel at times that certain forms of employee participation has an objective of weakening their independence and opposition towards management (Salamon, 1992: 354).

From the discussion so far, it is evident that in unionised organisations, the introduction of employee participation is likely to be the subject of discussion between management and employees. Managers also take into account the interests of the non-unionised employees in the participatory process. This results in potential conflict between management and the trade union, as the trade union views the involvement of those non-unionised employees as an attempt to weaken their role and power in the workplace. This is the reason for the general suspicion of the trade union towards employee participation, as it appears to be an attempt to undermine their organisation.

3.6.4 WHY IS PARTICIPATION NOT HAPPENING IN SOUTH AFRICA?

Salamon (1992: 362-363) identifies several reasons for the ineffective implementation of worker participation in South Africa. These include the following:

1. Managers and employees are not aware of each others perceptions about certain aspects of participation. Managers view participation initiatives as a sign of weakness on their side. They question the reasoning behind the need to consult with employees when they are the ones with the expert knowledge.
2. In South Africa most managers are still applying the principles of the traditional managerial directive style in the workplace, which does not compliment the implementation of participative initiatives. The result is that the introduction of participatory initiatives becomes risky and managers fear loosing their authority. One possible reason for employees wanting to lessen managerial control is the frustration produced by an authoritarian managerial style.

3. Employees have shown a desire to participate more at job level. This is agreed upon by both employees and management. Participation does not occur at a company policy decision making level and management is uncertain whether there should be worker participation at this level.
4. It is felt by both management and employees that employees should have adequate knowledge and skills for participation at job or task level, but they do not possess this kind of knowledge. Therefore, they do not have the propensity for high level policy decisions. Hence, appropriate training and development is required for employees to show that they are able and willing to participate at this level.
5. Suggestion schemes as a form of participation is weak as it only satisfies the intrinsic needs of employees, such as their financial needs. Suggestion schemes in the manner they are currently practiced are weak. Employees are requesting more effective suggestive schemes that can be used as participative instruments. Workers see the objective of suggestion schemes as increasing productivity.

Anstey (1997: 290-291) argues that a lack of information is another obstacle to participation. As mentioned above, managers have the responsibility to inform employees of the potential and actual hazards found in the workplace. This legislative provision does not automatically result in the co-determination of workers rights. Just because workers have now been granted the right to information, does not mean that they have automatic access to company information. OHSA increases the employee's awareness around OHS, but it fails to address the basic issues such as the causes of the OHS problems resulting from the actions of management and employees. It is evident that legislation is only effective when it is complimented with promotional activities.

Another obstacle to participative management programmes is financial resources. The cost-benefit argument clouds managements' rationality at times. Adopting safety and preventative measures, together with the input of the employees, is an ideal method to employ. These preventative measures result in the organisation balancing their cost against the benefits of such measures. It is ideal to select a method that costs the least to

reduce injuries and disease. Whatever approach is selected in the end, it is difficult to enumerate and quantify all the direct effects of hazardous working conditions. (Anstey, 1997: 295).

Businesses throughout the world recognise that it is essential to embrace programmes of worker participation. Worker participation is underpinned by a need to survive by becoming and remaining competitive. The idea and philosophy of worker participation is gathering momentum, but the achievements are still in their infancy or puberty at best. Throughout the world, the democratisation of the workplace appears to have lagged significantly behind the democratisation of society and its political institutions (Slabbert, 2000: 13-27). The profound advances in technology, telecommunications, the media and information systems during the last two decades of the 20th century are contributing significantly to major changes in the workplace. The combinations of socio-political transformation, together with the entrenchment of human rights contribute to significant changes in the way workplaces are governed. These forces of change are particularly relevant in South Africa. Our society at large suffered a belated transformation to democracy (Slabbert, 2000: 12-27).

It is not possible to establish productive worker participation within the constraints of traditional and authoritarian organisational structures common in the period before 1994. Top-down functions inhibit the ability of people to make contact with one another. These are attributes of authoritarian and adversarial management. Therefore, in this case to introduce worker participation, management needs to redesign organisational structures (Slabbert, 2000: 13-25). The weaknesses of worker participation schemes should also be considered. These have been outlined by Solomon as follows:

- They arise in response to crises; therefore, they are a management strategy to be used under certain conditions and disposed of in another. This strategy proves to be more favourable to employers.
- They tend to institutionalise the new arrangements, but tend to ignore the fact that the change occurs gradually.

- There is a common emphasis on productivity, but management does not see productivity in a holistic way. Management ignores the fact that many factors lead to lower productivity and in most industries a productivity increase will require the restructuring of the whole industry. Stressing the increase in labour productivity alone is management's attempt to make workers carry out the entire burden of the problem. Increases in productivity, are not necessarily bad for workers, if management negotiates it with the union. The emphasis should be on increasing over-all productivity and not just labour productivity (cited in Ntshangasa & Solomon, 1993: 32).

Employees and unions need to use the participative structures that have been established in their place of work relating to OHS to their advantage. If no such structures exist, they need to set up alternative structures within the organisation. Unions need to inform workers that participating in these structures is in their interest. One possibility to curb the autocratic styles of management regarding participation in OHS is through progressively eroding the employer's prerogative to determine working conditions.

Tracey argues that even though worker participation is universally advocated, most people contribute a small fraction of their full capabilities simply because firstly, they do not feel a sense of personal power and secondly, they are bound by a bureaucratic management system that does little to encourage this initiative (cited in Sarimana, 2003). Smallwood mentions the prerequisites for worker participation as being the acknowledgement of people to be the most important resource, a policy of openness and transparency, implementing a clear health and safety programme which includes a transparent goal, elected worker representatives instead of appointed worker representatives and training at all levels (cited in Burger, 2006: 41).

According to Weiss firstly, employees must want to participate in these initiatives. Secondly, they must believe that the intentions of management are honest and sincere. Thirdly, they must believe in their ideas and that if they have merit, they will be accepted by management. Fourthly, for the third requirement to be successful, a good relationship

must exist between management and employees. This relationship must be based on mutual trust and respect. However, if these elements of trust and respect are not present, managements' request for participation would be viewed with suspicion and mistrust by employees (cited in Burger, 2006: 42). Management must also be open to alternative viewpoints, as the employees' views are going to agree with those of management and sometimes they are going to disagree with those of management. If managers are bent on implementing only their ideas because they feel that theirs is more superior and they are convinced of this from the beginning, then it is not wise to involve employees as participants in their decision-making. In essence then, although there are obstacles to participatory managerial schemes, there are also benefits as Weiss notes, "the truth of the matter however, is if employees are permitted and encouraged by their management to participate, their respect for management often increases rather than decreases" (cited in Burger, 2006: 42).

It is once again evident that the efficacy with which management carries out their role in OHS through their actions and their attitude, has a definite impact on implementing the provisions of an OHS policy therefore, impacting on OHS in the workplace. Managers are realising that relationships need to be developed between themselves, employees and the trade union. This kind of relationship should be characterised by transparency, information sharing, people empowerment and participative decision-making. Appropriate training regarding OHS needs to be provided so that workers are able to have a more comprehensive understanding of OHS matters. An example of managers practising this is at the Toyota and VWSA plants. Hirschsohn (1995: 23) notes that at the Toyota plant, training is a crucial factor that requires consideration when initiating participation schemes. At the Toyota Plant, employees received a basic induction training programme.

At VWSA, NUMSA committed itself to ensure that management provided the employees with training in order to achieve a multi-skilled workforce. These endeavours were to compliment employee participation by enhancing the ability of the employees to do so comprehensively and constructively, so that management could not argue that the

employees lacked the necessary resources to take part in decision-making. This will improve employees' participatory skills and it will demonstrate their commitment to OHS. Training should be located at the top of managements' and employees' agendas in order to ensure its effectiveness. Although training should be a central part of management's objectives many managers do not have sufficient resources to ensure that training is carried out efficiently. Ensuring that OHS training becomes a central part of management's practices is a challenge that is faced by many South African companies. This is discussed further in the next section.

3.7 ENSURING THAT OCCUPATIONAL HEALTH AND SAFETY TRAINING BECOMES A CENTRAL FOCUS FOR MANAGEMENT

Stranks notes that training has been defined by the US Department of Employment as:

the systematic development of attitude, knowledge and skills patterns required by the individual to perform adequately a given task or job. It is often integrated with further education (cited in Burger, 2006: 46).

The Law in South Africa entitles employees to proper training through workshops on risk reduction, the use of machinery and emergency equipment like PPE, fire extinguishers, first aid kits et cetera. Particular attention should be given to inexperienced workers or those who have been transferred from other work stations, those who work alone and disabled employees (Benjamin, 1994: 115-118). OHS training and education is essential. This view is supported by Kinnan as he argues that "safety does not just happen, it has to be taught" (cited in Burger, 2006: 47). It is argued by Stranks that

employee's competence declines, if skills such as those used in emergency procedures are not put to regular use. Therefore, training must be repeated periodically by management to ensure continued competence (cited in Burger, 2006:46).

The Skills Development Act aims to,

- Link skill formation to the requirements of a growing economy and extend education and training to people both within and outside formal employment.
- It is primarily concerned with industry-based training, improving the intermediate level skills base of the country and labour market training for target groups (including the unemployed, retrenched workers, youth, women, people with disabilities and people in rural areas).
- A National Skills Fund will be established to finance national priorities as defined in the national skills development strategy (Department of Labour, 2005).

OHSA specifies that OHS training must be carried out in normal working time. The act extends the employers duty to provide OHS information, training, assistants and facilities to employees and to health and safety representatives so that they can carry out their functions effectively. White argues that it is not sufficient to merely introduce health and safety standards without monitoring them. The duty to train employees in OHS should be accompanied by a duty to supervise various operations in the workplace (cited in Smallwood, 2000: 76). According to Benjamin, OHSA emphasises the importance of supervision, especially in the use of plant machinery and supervisors must be competent enough to deal with eventualities that arise in their sections of the workplace i.e. they must be able to supervise work, communicate work hazards to employees and take appropriate measures during emergencies (cited in Burger, 2006: 83).

South Africa was ranked on measurements around human resource development. The world competitiveness survey shows that South Africa's average country rating in 2004 was forty-nine out of sixty. These indicators include education. South Africa's biggest challenge as a nation is to develop her people. Our workforce must have both knowledge and skills so that South African companies can compete with international companies (ILO, 2005: 2).

The RDP clearly recognises the contribution that education, training and development makes towards job creation, enhanced productivity and rebuilding South Africa's economy. The RDP envisages an integrated national programme of education, training

and development, which is to be managed in a holistic way and linked to a national qualifications network. This ranges from the early stages of education, including basic adult education, through to tertiary-level education. Therefore, companies are finding that they are compelled to focus greater efforts on the training and development of their employees. Currently, it is expected that companies should accept a larger share of the responsibility for specific job training as well as the general educational level of the workforce (Bezuidenhout, Garbers and Potgieter, 1998: 107).

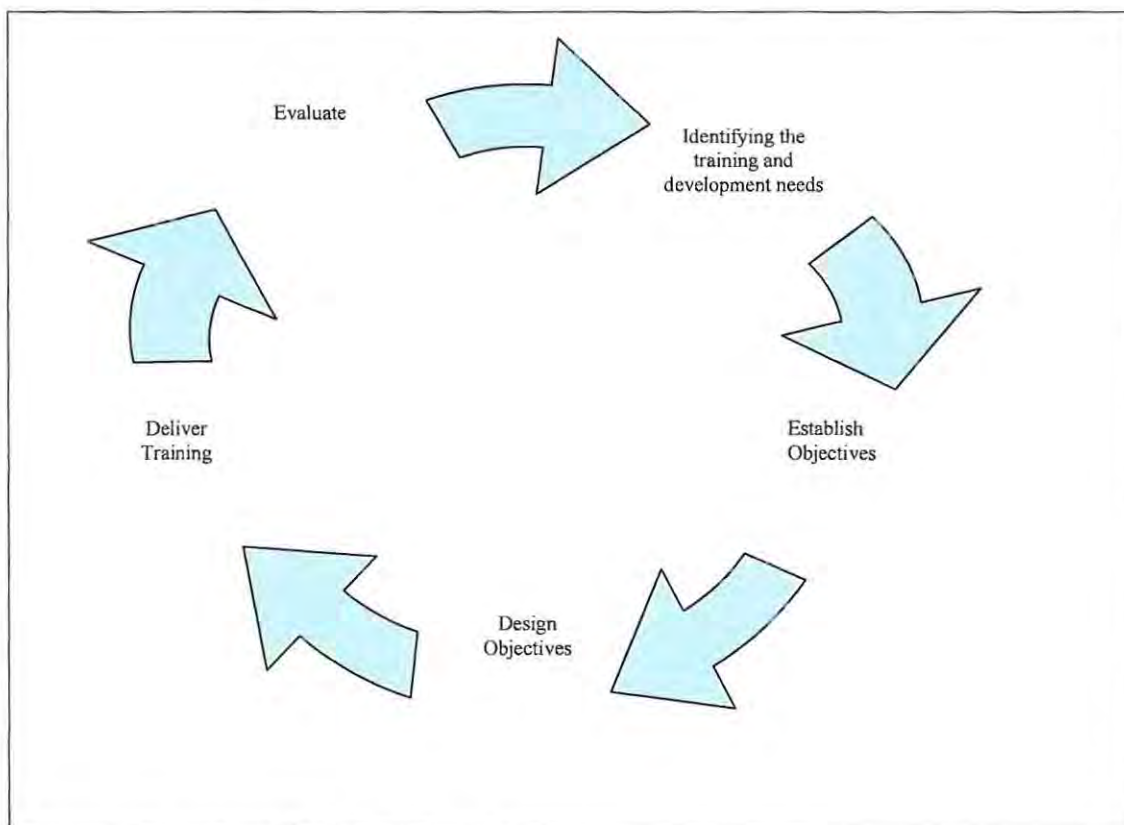
Training and re-training is significant to workplaces as it provides employees with the skills that are required currently, as well as those that will be required in the future. Training and development results in the company acquiring the required skills, together with employee commitment. These are essential for the provision of high quality goods and services – i.e competitiveness and survival. The authors make apparent that “in the definition of an unfair labour practice, the Labour Relations Act specifically states that the unjust conduct of the employer relating to training is considered an unfair labour practice” (Bezuidenhout, Garbers and Potgieter, 1998: 108).

It is for this reason that an extremely important aspect of OHS is worker training. The primary purpose of training is to remove performance deficiencies, whether current or anticipated that may cause employees to perform at less than the desired level. Hence, training and development enable employees to be more productive. Training and development is vital if organisations wish to be able to adapt and be competitive (Bezuidenhout, Garbers. Potgieter, 1998: 111). OHS training is one of the essential components of an effective safety programme. If training is an aspect of the OHS policy, it ensures that the objectives of the organisation in this regard are put in writing, serving as a guide for management and employees. These programmes should be designed to ensure that all the employees understand and are aware of the hazards that they are exposed to, as well as the methods that they should employ to avoid such hazards. However, most companies provide a variety of training opportunities for the employees, but often it is not done in an integrated way nor is it linked to the developmental needs of

the employees, as identified by performance appraisal reviews or other types of assessment.

Management also needs to undergo training to understand their key roles and responsibilities in carrying out their safety duties effectively. The training of employees who work in high hazard or special hazard areas is often ignored. Training in both the use and maintenance of personal protective equipment is not given priority. Management needs to communicate the perceived purpose of the training and the employee in turn must understand the purpose of instruction (Roughton and Mercurio, 2002: 42). The diagram below captures the significant aspects that management must consider before introducing training initiatives.

Figure 3.3: Training and Development Cycle



(Source: Storey and Sisson, 2002: 157).

The first aspect of the cycle is to identify the training and the development needs of the workers. Employees need to make management aware of their training needs by informing them in which areas of their work their skills need to be developed. The second aspect is establishing, together with the employees, what the objectives of the training programme are. Management and employees also need to identify their weaknesses regarding OHS matters and develop appropriate training programmes to transform their weaknesses into strengths. The third aspect involves management taking the responsibility for delivering this training. The final aspect of the training and development cycle is evaluating the programme comprehensively in order to identify its strengths and weaknesses through the results of the programme. If the programme objectives are not met or satisfying to the employees, management needs to go back to the first step in order to re-identify the training and development needs of the workers (Storey and Sisson, 1993: 58-59). Training needs to be a central aspect of management's practices in developing a health and safety policy.

One of the most important points to bear in mind when developing a successful training programme is a needs-analysis. Training is highly important, but it is also the most neglected by management. The need for training is often stated by workers, but employers do not take the time to identify the specific training needs of workers and therefore, do not conduct a needs analysis. A training need exists any time an actual condition differs from a desired situation in the human aspect of organisational performance, or when a change in present human knowledge, skills or attitudes can bring about desired performance (Fisher and Fletcher, 1987: 35). Conducting needs-analysis ensures that training will be applied to appropriate areas. Appropriate safety training has a positive impact on the awareness of individuals at work.

Determining the training needs of a workforce is time consuming, but it results in comprehensive planning (Roughton and Mercurio, 2002: 266). A needs-analysis can be compiled through a workplace analysis and a hazard prevention and control programme. Incident reports are another source that managers can use to develop a needs-analysis.

Introducing new work practices, processes, equipment and materials may introduce new hazards into the workplace. Training must address these changes. However, training is not the solution to all problems. As Roughton and Mercurio (2002: 274) put it, “defining training needs is a key point in the safety process, but not always the complete answer, as it provides the objective and sets the criteria for performance management”. Another good method of defining what training is required in the workplace is looking at various documents and materials available in the organisation. One could look at the establishment’s incident experiences, occupational health and safety logs and workers compensation claims. Information from prior workplace safety inspections and safety manuals could be integrated into the training programme. The safety warnings provided by manufacturers and information regarding safety provided by trade unions could be used in the development of training programmes (Roughton and Mercurio, 2002: 37).

Management does not only have the responsibility to train currently employed employees, but also new employees through a process of orientation. New employee orientation is often forgotten, regarding training related to OHS. Furthermore, it is not only employees who need training, but managers too. Managers must be trained not only to recognise, but also to avoid potential hazards as the employees are (Roughton and Mercurio, 2002: 110).

OHSA considers safety a vital aspect of the responsibilities of management. Safety education is most effective when it is merged into the overall company’s training in performance requirements and job practices (Roughton and Mercurio, 2002: 268). Before management implements training, they have to ensure that the company policy clearly states their commitment to safety training. Language barriers need to be considered when developing a training programme and therefore, it is important that both management and employees develop the programme together. (Roughton and Mercurio, 2002: 269). The success of any training programme depends on the level of commitment from management and employees. Management’s primary responsibility is to focus on the safety concerns that can be addressed by training (Roughton and Mercurio, 2002: 71).

Training should not only address the roles and responsibilities of management, but also of employees.

It is crucial that management makes OHS related training a central aspect of their managerial role. This will not only enhance the level of knowledge of employees regarding the OHS structures and procedures in their workplaces, but also their general understanding of their role in OHS. Trade unions too need to locate training and development relating to OHS higher up on their agendas, as this will encourage management to be more consistent and thorough with their OHS training initiatives.

The union has a central role to play in occupational health and safety. However, the extent of their involvement is often shaped by strategies that managers employ. The following section provides an outline of the manner in which trade unions respond to the perceptions of management regarding the extent of their participation in decision making and what the outcomes of their responses are. Managerial attitudes and behaviour have more of an influence on some aspects of the workplace than others. Its influence on the role of the trade union is one of the stronger ones.

3.8 THE MANNER IN WHICH MANAGEMENT SHAPES THE INVOLVEMENT OF TRADE UNIONS IN OCCUPATIONAL HEALTH AND SAFETY

The South African labour sector has been characterised by unnecessary and un-procedural industrial action in the past. This was because of conflict and opposing negotiations between management and labour. Trade unions are designed to allow meaningful discussion between management and their workforces on all workplace issues which fall outside of the traditional wage bargaining arena (Slabbert, 2000: 10-26).

The purpose of a trade union is, amongst others, to promote the interests of all the employees in the workplace, whether or not they are trade union members. They provide a mechanism for consulting with the management with a view to reaching consensus. Unions provide for worker participation in decision making in the workplace and they enhance the efficiency in the workplace. Trade unions contribute to the democratisation of the workplace by promoting co-operative relations between management and employees, through consultation and participative decision making regarding company issues such as OHS. A win-win situation is envisaged regarding OHS, where employees have the opportunity to participate in decision-making that will lead to an improvement in their working conditions, while employers benefit from a more peaceful labour relationship, co-responsibility and an increase in business productivity and efficiency (Slabbert, 2000: 10-26).

OHS committees are made up of health and safety representatives who represent employees and the staff committee representatives who represent management. The trade union has the ability to form their own health and safety committees and to caucus on OHS matters, before meeting in the joint health and safety committee meeting with management. The trade union representatives and the health and safety representatives meet on a regular basis because of their close working relationship. The principal objective of this committee is to resolve work related OHS matters. A second objective of theirs is to work towards the establishment of good health and safety policies at the worksite. A third goal is to educate and inform union members about hazards which should be reported and corrected. One could say that OHS committees are formed for both reactive and proactive reasons (Burger, 2006: 51).

According to Benjamin, health and safety committees have similar functions and rights to those of health and safety representatives. These functions include the right to investigate incidents and compile reports as well as make recommendations to management and keep records there of and liaise with the inspectorate in terms of OHS (cited in Burger, 2006: 86). These committees are established if there are two or more health and safety representatives in the workplace. Health and safety representatives must be members of

at least one health and safety committee. Managers may nominate people to be on this committee as long as they do not exceed the number of health and safety representatives. Technical advisors may be co-opted onto health and safety committees, but without voting rights. The health and safety committee should meet as often as it is necessary, but at least meet more often if more than ten percent of the employees request a meeting of the committee. Lewis (1992: 385) believes that consultation and co-operation between management, employees and safety representatives or committees facilitates active and informed participation towards effective risk reduction and management. OHSA's provisions for employee participation creates an attitude of shared responsibility in the application and monitoring of safety rules and regulations, as well as the initiation, promotion, development, maintenance and review of OHS practices.

In the face of stiff international competition, South African companies will have to increase the quality of their products. However, the development of the productive forces and the growth of the unions make it impossible for management to use coercive methods to increase productivity and ensure efficiency and quality of work. Instead, management must elicit the co-operation of the union, by creating a working environment which encourages workers to use their brain power and initiative. In the opinion of Slabbert (2000: 10-26), the unions have three options facing them when dealing with the strategies that management has put forward.

The first option is to stand back and ignore the participative processes introduced in the workplace. The advantage of choosing this option is that the union avoids the risk of losing its identity and it avoids co-managing the business with management, while not sharing the profits (Ntshangasa and Solomon, 1993: 32). The disadvantages of this approach is that while the union stands back, its members and shop stewards participate unguided, without a framework of proper logistical back up. The union is not visible in their day to day struggles and employees soon see themselves as unconnected to the union beyond the workplace.

The second option is for the union to create an obstruction to participation. In this case, the union actively campaigns to block management's introduction of participative schemes. To do this successfully, it needs to involve all members at a particular company. The advantage of this option is that the union keeps its identity of fighting the bosses to protect its members' interests. It also puts to rest the myth that the contradictions between labour and capital are reconciled. The disadvantage is that by the time the union learns about these participation schemes, its members and shop stewards are already involved in them and may resist attempts to obstruct the process. Management presents schemes with the motivation that they want to democratise the workplace, give workers a say, recognise workers contributions and provide them with training, education, literacy and housing, making it difficult for members not to accept it (Ntshangasa and Solomon, 1993: 32).

The third option facing the union is becoming involved in the participative schemes of management. This option has two possible paths. The first is driven by management and the other is driven by the union. In the first option, the union merely participates in structures that are designed by management. In the second, the union is part and parcel of the very process of defining participative structures. The advantage of this option is that depending on the union's strength, it can push the participative schemes further than management initially intended. It also requires the union to give members a framework and organisational backup. The disadvantage is that it assumes that the union is participating because it has accepted the process as legitimate. The union may end up identifying itself with the goals and objectives of the company (Ntshangasa and Solomon, 1993: 32).

Engaging with participation schemes by extending collective bargaining structures would advance workers' control over the labour process including those of an OHS nature. Most workers have a basic understanding of the conflictual relationship between labour and capital. They understand the importance of two way communication for their leaders. The option that the union takes must build on its collective strength, its structures and its tradition of report backs and mandates. A proposal was put forward that the unions adopt

a position of adversarial participation because of the inherent conflictual nature of the relationship between management and employees (Ntshangasa and Solomon, 1993: 33).

These participative schemes raise the key questions of the relationship between individual workers and their collective organisation. Management believes that the individual interests of workers would be served by the company's success. It puts managers and workers on the same side in an effort to improve productivity and growth. However, this should not be at the expense of the union. It has been suggested that the union participates on their own terms, so that they are able to achieve their goals of expanding worker power and the role of the union. This is referred to what is known as 'adversarial participation' (Ntshangase and Solomon, 1993: 33). Adversarial participation is a kind of participation that does not ignore the irreconcilable differences between labour and capital. This can only be accomplished by establishing the role of organised labour in the whole process because only through their collective strength can workers direct such schemes. Worker participation is argued for in all decisions that are made in the company. The independence and the divisions between management and labour shouldn't be played down. Recognising the differences should serve as the basis for regulating conflict. If these differences are ignored or denied, they will surely erupt in an uncontrolled and destructive way. This recognition is the essence of adversarialism (Ntshangase and Solomon, 1993: 34).

Some trade unions tend to be more involved than others in OHS matters due to the nature of their work, such as NUMSA. Their members in automobile manufacturing on the production line are more accident prone. Sarimana argues that:

a health and safety focus by trade unions poses a dilemma as far as strategy is concerned. On the one hand, separating health and safety from collective bargaining, which lies at the heart of trade unionism, can marginalise the issue. On the other hand, adding health and safety to all other responsibilities may result in it not receiving sufficient attention (cited in Burger, 2006: 35).

According to Magane, effective intervention by the trade union regarding OHS relies on a certain amount of understanding of workplace conditions and potential remedies. It is therefore, imperative to ensure successful intervention through the regular training of shop stewards and employees. Trade union officials must ensure that their union representatives can take a lead in OHS issues, as well as provide adequate services and structures to their members on the shop floor, struggling with these issues at the workplace (cited in Burger, 2006: 67).

Therefore, it is suggested that workers be involved in direct joint decision making from the shop floor through to union structures. This means that the trade union, rather than workers as individuals should lead any permanent participative structures. This is the only way to ensure that the process is worker led and not individual led. Some participative schemes fail to address the role of the union. This has the potential to destroy a workers ability to see them as being part of organised labour and undermines workers chances of safeguarding their long term interests (Ntshangase and Solomons, 1993: 34).

3.9 CONCLUSION

No OHS programme can be effective without managerial support. Unless OHS is seen as useful and worthwhile, it is likely to be perceived as a cost of doing business, rather than an integral part of doing business. Management needs to be made more aware of the connection between the manner in which they carry out their OHS role, OHS and productivity. Health promotion is a first priority business need. All the managerial lines could be encouraged to support health promotion, as it needs to be built into the various managerial systems, making it a viable force in the organisation (Deljoy and Wilson, 1995: 12).

It is evident from the discussion in the various sections of this chapter that managements' role, their attitudes and their behaviours play a central role in efficiently implementing OHS policy provisions with the aim of securing safe workplaces. Managerial perceptions

are crucial factors that require much consideration when attempting to deal with the many obstacles to introducing participatory managerial schemes, in the development of training initiatives and in the extent of the involvement of trade unions in OHS. In order for employees to participate successfully in OHS matters, they need to be adequately informed and educated. Although there is an obvious need for more stringent OHS implementation, it continues to be characterised as a low priority among management. OHS has improved dramatically from the past only in terms of legislation.

OHS is becoming an increasingly important factor that employees need to consider when conducting their daily activities. The manner in which employees view their role is an important factor to consider, as it has an impact on their actions and attitudes. In situations where management is not the driving force behind OHS initiatives, employees have a key role to play in any transformation processes. The next chapter provides an outline of the role and views of the employees at DCSA in relation to the OHS systems in the company.

4

EMPLOYEES AND OCCUPATIONAL HEALTH AND SAFETY

4.1 INTRODUCTION

Employee views are significant aspects to consider when reviewing the OHS structures in a company. Their support is necessary if managers want to ensure the successful implementation of OHS structures and procedures. This has already been recognised in chapter three. Managers are realising that it is important to develop relationships with the employees, but at the same time being mindful of the inherently conflictual nature of their relationship. Participative decision making is a central area in OHS that requires strategic consideration as the obstacles there too, explored in chapter three, have a definite effect on the success of these endeavours. Most employees play an active role in ensuring that the conditions in which they work are made safe by management and their fellow employees. However, the reality in most South African workplaces, as chapter three makes evident is not such a perfect-painted picture.

This chapter consists of six main aspects, guiding the central argument. Each aspect consists of the views and experiences of the respondents from the five production divisions at DCSA East London. These divisions are: paintshop, assembly, colt, logistics and bodyshop. A brief outline of each division is provided.

At the bodyshop, several hundred sheet steel parts are joined to complete the bodyshell of the Mercedes-Benz C-class. The bodyshop is largely automated, but skilled jobs are done by highly trained employees. The high-tech production infrastructures ensure that superior quality is the norm within the bodyshop (www.daimlerchrysler.com).

Paintshop managers refer to their division as being world class due to the state of the art technology used. The Final Assembly division is where the painted bodyshell is transformed into a completed Mercedes-Benz C-class vehicle. Approximately ten thousand individual components are assembled, before the vehicle is ready to leave the production line. Robots are only used in areas of final assembly, where heavy production parts are needed to be precisely fitted. Final Assembly completes more than one hundred and seventy five C-class units a day (www.daimlerchrysler.com).

The Colt production facility includes the bodyshop, assembly line, paintshop and final finish. The Colt production process is modelled on best practice systems, as well as a process applied internationally, which is aligned to DaimlerChrysler global norms. The quality and audit process for colt, conform to stringent DaimlerChrysler standards to ensure a quality product that will satisfy customer requirements. A logistics department is found in all the divisions. Their principal objective is ensuring that there is a constant supply of the required parts to the production line. Hence, they ensure that the production line staffs are meeting the production targets for the day (www.daimlerchrysler.com).

The first aspect for analysis is the recognition of the employees' views of their working conditions. Each department's employees have different views and experiences of this. They will be compared and contrasted throughout the chapter.

The second aspect involves worksite inspections. The manner in which inspections take place is explored because of its direct influence on the working conditions of employees. In this discussion, the manner in which managerial actions, such as the manner in which they monitor the employees carrying out their work processes is highlighted as this influences the actions of the employees.

The third aspect concerns the extent to which employees participate in OHS matters in their divisions. In a few divisions managerial actions, attitudes and communication challenges in relation to OHS have created a negative impact on employee participation within the divisions. Employees are interested in becoming more involved in OHS matters and support management in creating more opportunities to encourage this.

The fourth aspect centres round the views of employees regarding management's participation in OHS. The commitment of the team managers to OHS in the various divisions is assessed. Also, the extent of the employees' support for the company's OHS programme is explored. Then the ability of the OHS management programme to protect the employees is questioned, followed by the changes and improvements that the employees would make to the current OHS management system being identified.

The fifth and sixth aspects are dealt with briefly. The former concerns the employees' knowledge of their duties under OHSA, while the latter is concerned with their views on the OHS training that they receive. Employees are becoming more aware of the legal aspects concerning OHS that have a direct impact on them, although they feel that more emphasis should be placed on training.

4.2 THE VIEWS OF EMPLOYEES REGARDING THE WORKING CONDITIONS IN THEIR DIVISIONS

The respondents in the paintshop are aware of the dangers that are found in their workplaces. Some of the dangers that are identified include moving lines i.e. conveyor belts, chemical solvents such as benzene and some of the equipment that the employees work with. Team managers or health and safety representatives are immediately informed when employees come across any conditions which they consider to be unsafe. Employees in this division are not only aware of their duty to report these unsafe conditions, but also practice it. Thabo stated that, "it is everybody's duty to report unsafe

conditions” (Paintshop Hourly Paid Employee, 5 July 2005). All the employees stated that they have not been asked to perform an operation which they consider to be unsafe. The employees emphasise that the conditions in which they work are safe,

the conditions in which I am working have been made safe by DaimlerChrysler South Africa East London. At the moment they are safe. It had been audited once a year (Thabo, Paintshop Hourly Paid Employee, 5 July 2005).

This results in a positive impact on OHS, as employees are aware of the dangers and they know what to do in the event of danger. It can be argued that employees exercise their responsibility through supporting the implementation of the OHS policy provisions. None of the employees show an interest in how their division’s safety records compare with the safety records in the rest of the divisions. Their reasons centre round the same factor,

you never get a chance to go to other departments. You are here from six to two, you don’t really know what’s going on in their departments, you just stay here (Carol, Paintshop Hourly Paid Employee, 5 July 2005).

Michelle, who is an Assembly Hourly Paid Employee, takes an active stance against the dangers in her workplace. The employees in this division are aware of the procedures that are in place protecting them from these dangers. The company sends all their employees for training to ensure that they know exactly what to do in the event of danger. Employees in this division “will definitely not!” accept unsafe working conditions (Maritz, Assembly Hourly Paid Employee, 7 July 2005). Through their actions, employees are assisting management in putting the provisions of the OHS policy into practice. Employees in this division take an interest in and show genuine concern towards OHS. A negative impact is made by the safety representative as he is not efficiently sharing the OHS information with the shop floor. Assembly employees have a particular interest in how their division’s safety records compare with that of the other divisions, so that they have the ability to compare their divisions’ emphasis on safety to the other four divisions. This can be contrasted to the views of the paintshop employees. However,

Quinton's interest in his own division's safety records is of more significance as he explains,

the guy what works in the line, our safety rep, I always read his letters. They actually don't get given to the plant. So whatever he discusses in his meetings is actually kept between him and this guy. So the only way, I actually go to that file and read it. But, I don't know if everybody else knows that there is a file like that (Assembly Hourly Paid Employee, 7 July 2005).

According to Section 18 of OHSA (1993), the health and safety representatives evaluate the overall effectiveness of the health and safety measures that are in place in the company. The manner in which the health and safety representative in this division carries out his or her duty requires critical review. According to the account of Quinton, the representative is not fulfilling his duties and responsibilities in terms of OHSA, contributing negatively to OHS rather than positively. Although employees are actively involved in the development of safe working conditions, communication challenges between the health and safety representative and the shop floor are hampering the involvement of the employees in the division regarding OHS matters, as well as the attainment of the objectives of the OHS management policy.

It is conclusive from the respondents at the colt division that "the only danger we are working with here is spray-paint" (Andrew, Colt Hourly Paid Employee, 8 July 2005). Darryl mentions a second important danger that he as the health and safety representative is struggling to control and remove from his workplace, "the people driving units in and out you know, that can be a danger" (Colt Hourly Paid Employee, 8 July 2005). Darryl qualifies his statement by saying,

I was chosen as the health and safety rep in this area, which is an honour. The spray-painting people should be wearing their respirators and things, but unfortunately, that is not happening. It is one of the things that I have taken up with management and nothing has been done about it. Secondly is the driving. There is a lot of people driving who doesn't have license. They are using this area as a race track. And the one thing that I said to my supervisor straight: if anything should happen, I will not take responsibility because he was supposed to come down to the shop floor and

give his reasons as to why they don't have a license and why he lets them drive around here! (Colt Hourly Paid Employee, 8 July 2005).

Employees sometimes blind themselves to the reality of their working conditions because nobody wants to take the responsibility for the change. One possible reason for this attitude and behaviour of the employees is their ignorance to their responsibility for their own safety and that of their co-workers. Management is not adequately emphasising the role that employees have in the OHS management system. Employees are not being held accountable for their OHS actions in some divisions and are not practicing their responsibility of integrating OHS principles into their daily job tasks. The mere existence of an OHS policy does not mean that its provisions are going to be implemented and practiced by the employees or management. Managements' OHS system is not aligned to their OHS goals resulting in the desired safety culture failing. In this division, management is blatantly rejecting their health and safety responsibility, resulting in poor working conditions. Management is not committed to OHS, which could be a reason for the lack of it in employees too. However, it must be considered that all systems are not flawless and management will find loopholes to absolve their responsibilities. When asked how he felt about this, Darryl's response was: "I have confronted management - nothing has been done about it" (Colt Hourly Paid Employee, 8 July 2005). This is an example of management having OHS on a list of priorities that change constantly, as discussed in section 3.5. A second possible reason of the many could also be that the attitude management has adopted towards OHS, is creating barriers to the attainment of OHS objectives as the table in section 3.5 makes evident. Despite this, most of the other colt division employees do not accept unsafe working conditions as George explains,

actually you know, unsafe conditions is unfair! But I report it. I have to report it if it is not right. What I experience that is wrong, I tell them. I open my mouth and I tell them so we can make improvements on it basically (Colt Hourly Paid Employee, 8 July 2005).

Management is not prioritising the health and safety of the colt employees through their failure to remove these hazards from their workplace. Employees are not adequately supervised by management to ensure safe work practices. The managers of the colt

division are not taking all the necessary steps to ensure that the employees abide by the requirements of OHSA and the provisions of the OHS management policy. This is evidence of management's actions and attitudes in relation to OHS in this division, having a direct effect on the provisions of the OHS management policy being implemented, as well as the working conditions, the actions and attitudes of the employees regarding OHS. The inconsistency of managements' attitude to OHS is evident in that sometimes they do consider the views of the employees and other times they do not. As it has been noted in section 3.5, health and safety is not regarded as a value in the division, but rather as something that managers can choose to decide whether it should be done or not.

In the logistics division, the most often encountered danger that employees are aware of according to Makoyi "is actually the hysters that we drive" (Logistics Hourly Paid Employee, 20 July 2005). All the respondents agreed that as soon as they come across an unsafe condition in their workplace, it is reported to their team manager immediately. The working conditions to which employees in this division are exposed are safe. As in the paintshop, assembly and colt divisions, employees in logistics have never been asked to perform an operation which they felt was unsafe. Emphasis needs to be placed on 'they' as it refers to the employees' understanding of the term 'unsafe'. This statement is made because of the indifferent attitude employees have towards driving without licences and not wearing the correct personal protective equipment (PPE) when spray-painting. Respondents in this division like in the assembly division, show a positive interest in how their division's safety records compare to the other divisions' safety records because

you see maybe they are going to be having the type of equipment that we have so that we can share information, discuss problems and solutions that maybe we have that they don't have. Maybe they changed their equipment, they give us advice to change our equipment ja (Biza, Logistics Hourly Paid Employee, 20 July 2005).

This shows the active interest of employees regarding OHS in general in the company, as they want to improve their OHS knowledge and awareness, but more importantly their working conditions. Through this practice a positive contribution can be made to the

OHS structures in their divisions and to the company at large. These practices impact OHS in the workplace for the better.

Through the introduction of more stringent communication systems between the various production divisions relating to OHS, positive outcomes for OHS in general and for employees are possible as the view of Biza makes evident. Through this process, employees may stop harvesting the naïve idea that the OHS practices of management and themselves in one division do not affect all the other divisions. This can be seen as being a learning process through which employees can share their OHS experiences with the employees from the other divisions. Quinton, an Assembly employee, shares in the views of Biza, as he too suggests that a monthly paper be sent out to employees containing all the OHS achievements, improvements and accidents in the various divisions by management. Quinton mentioned that “this might just be the thing to keep the managers on their toes with occupational health and safety” (Assembly Hourly paid Employee, 7 July 2005).

Employees in almost all of the divisions are making apparent that management are not providing them with adequate information concerning the general level of OHS in the plant. This could be used to managements’ advantage through setting up promotional activities in the plant around OHS. Employees are showing an interest in OHS matters.

Contrasting working conditions are found in the bodyshop. According to the employees, working conditions are unsafe, “ja, there is unsafe things here in the company, but we have got to speak to the management so that we can look at it” (Luvuyo, Bodyshop Hourly Paid Employee, 25 July 2005). Communication challenges between the team manager, the health and safety representative and the employees are, among others, the underlying factors resulting in unsafe working conditions. The provisions of the OHS policy are not enforced, as Ricardo mentions, “we don’t have safety meetings” (Bodyshop Hourly Paid Employee, 25 July 2005). The processes of bringing about change in this division according to Ricardo,

takes quite a lot of time. So I would say that we are busy working on those unsafe issues (Bodyshop Hourly Paid Employee, 25 July 2005).

Ricardo's perception is shared by Luvuyo. He agrees that the division is currently working on these problems, "but with time it is going to come right" (Bodyshop Hourly Paid Employee, 25 July 2005). As in the colt division, there is a lack of commitment from management regarding OHS on the shop floor. One of the many possible reasons for this is that production takes precedence. This statement is supported by the fact that an employee was forced to perform an operation which he considered to be unsafe:

ja, I have been forced to work unsafe. I had an injury once and my injury came from offloading from the lines and then after my injury, I was given two weeks to recover, but in those two weeks, I was forced once again to offload. So yes! (Ricardo, Bodyshop Hourly Paid Employee, 25 July 2005).

The ability of OHSA to secure employees rights to refuse dangerous working conditions is questioned in section 3.3. OHSA fails to provide dispute resolution procedures for instances where an employee considers the required actions that have to be performed on their managers instruction to be unsafe i.e. unreasonable. Managers, rather than the Act measure what actions are reasonable and they determine what is reasonably practicable according to their own personal standards. This particular employee in the bodyshop did not exercise his right to obey the unlawful orders of his manager. The term 'unlawful' is used because the consequences of the actions contradict the employer's duty to take reasonable care of the health and safety of their employees.

Employees are not prepared to work in unsafe conditions and they are aware of their rights according to OHSA. Patrick shares, "we have a right to complain and to refuse dangerous working conditions" (Bodyshop Hourly Paid Employee, 25 July 2005). The reason behind employees not practicing their rights if they are aware of them requires consideration and questioning. A few of the reasons, of which there are many, could be that employees fear being victimised by management for raising such concerns. Employees also fear that management might move them to another department because

they are labelled as trouble-makers. Employees fear losing their jobs and trust in the OHS management system without questioning management's prerogatives. The fear of disciplinary action results in employees being cautious about disobeying their manager's instructions even when they do seem unreasonable.

Employees find it difficult to practice their legal rights in the Colt and Assembly divisions. Unsafe working conditions do not only endanger the lives of one employee, but all the employees working in a division. A large percentage of employees are taking an active interest in creating safe working conditions for themselves and their fellow employees. It is evident that although employees are provided with rights through legislation, it does not automatically ensure safe working conditions. Inspections need to be carried out on a regular basis by management to check that the work processes are safe, the equipment and machinery are safe and most importantly, that employees are practising safe work processes outlined by management and OHSA. One remedy cannot be prescribed for all the divisions as it is evident that their circumstances differ. The situation in each department requires individual consideration. The attitude and the actions that managers adopt towards OHS have an influence on the working conditions of the employees when OHS is not integrated into their practices, ultimately impacting on the provisions of the OHS management policy being implemented. Therefore, managers need to ensure that their practices and strategies are flexible and conducive to a changing environment.

4.3 THE CONTRIBUTION MADE BY WORKPLACE INSPECTIONS TO THE ESTABLISHMENT OF SAFE WORK PRACTICES

In the paintshop the equipment that the employees work with is inspected on a regular basis. Shaun makes apparent that "there is a scheduled time-frame in which equipment is inspected" (Paintshop Hourly Paid Employee, 5 July 2005). The equipment is either inspected by maintenance or the employees carry out their own inspections. Although accidents and injuries are thoroughly investigated, all the respondents emphasised that

“we never had anything on our line” (Carol, Paintshop Hourly Paid Employee, 5 July 2005) when referring to accidents and injuries. Two employees from the paintshop stated that they are checked on a routine basis to see whether they are doing their jobs safely, but Shaun said, “I’ll be honest, no!” (Paintshop Hourly Paid Employee, 5 July 2005). Thabo shared Shaun’s view

employees not always checked. I can’t say they always checked, ja” (Paintshop Hourly Paid Employee, 5 July 2005).

The result is that management again in this regard, has not completely integrated OHS into their managerial principles and practices. It has not formed part of their daily job tasks and it is not a constant priority. The physical and psychological well being of the workers, as section 3.4.2 makes apparent is not the primary concern of managers on a daily basis, resulting in negative outcomes for management and the workplace. The basic psychological needs of the employees are not being met by management, resulting in employees not being motivated and satisfied, ultimately affecting their actions and attitudes during production time. Managers in this division are not regularly carrying out inspections, resulting in OHS not always being a priority.

Michelle says that in the assembly division, “equipment is inspected on a daily basis because we got a daily manager’s checklist” (Assembly Hourly Paid Employee, 7 July 2005). Once the inspections have been carried out, the results are reported to maintenance as it is done in the paintshop. All the respondents are aware of the procedures that have to be followed when accidents and injuries occur. According to the respondents, “very few accidents and injuries occur in the area” (Quinton, Assembly Hourly Paid Employee, 7 July 2005) as in the paintshop. Employees are checked routinely to see whether they are doing their jobs safely. In the words of Michelle, “yes, we have got an operational safety plan and management have to adhere to it” (Assembly Hourly Paid Employee, 7 July 2005). Quinton emphasises this point further by mentioning that inspections are going on and “I can tell you, from an inspection side they do it well, but I wouldn’t say from the team manager” (Assembly Hourly Paid Employee, 7 July 2005).

It seems that in both divisions so far inspections are done thoroughly and regularly. However, the divisional manager and the employees play a bigger role in these than the team manager, as they take on this responsibility. One of the many possible reasons for this is that management has not defined the roles and responsibilities of the levels of management relating to OHS effectively, especially on the shop floor and neither are they regularly monitoring compliance to these. Managers are also possibly not being held accountable for their roles and responsibilities in certain divisions because of a lack of adequate OHS knowledge on their part.

This confirms the discussion in section 3.5. The seriousness with which most employees view safe working conditions can be shown through the low accident rate in their divisions. However, it must be considered that accident and injury statistics alone are not effective in evaluating the safety in a workplace as near-misses are not recorded. Management may have an incident free zone, but they still have a negative safety culture which is not contributing positively to OHS in the plant. Management is not effectively monitoring the leadership on the shop floor who are responsible for OHS. It has been noted in chapter six by some divisional managers that, although they have over-all responsibility for OHS in their division, what happens on the shop floor is not directly and entirely their central area of focus or concern.

As in every company no structure, process or procedure works well in all divisions. They need to be tailored to suite the individual characteristics and needs of the various divisions as section 3.2 made apparent. This is evident through the equipment in the colt division rarely being inspected because

you see the only tools that we have got in our area is basically two: we have got polish and the rest of the others are spray-guns. Those things, they don't pack up (Darryl, Colt Hourly Paid Employee, 8 July 2005).

The equipment that Andrew works with is never inspected because he makes the tools himself, while Theminkosi does not use equipment that can be inspected by the operator. George on the other hand inspects his equipment on a daily basis. If he comes across a

problem with his equipment he raises it with his team manager, "I talk; there is a meeting every second week and I talk there too, to protect myself" (Colt Hourly Paid Employee, 8 July 2005). Employees do not agree that they are checked on a routine basis by management to see whether they are doing their jobs safely, as they make apparent,

ja, because it is every superior's duty of the area, you know. If he knows the area, if he knows the persons, if he knows the jobs you understand, for him to ensure that employees are doing their jobs in the correct way (Darryl, Colt Hourly Paid Employee, 8 July 2005).

One possible way of the many, to understand this point, is Darryl saying that management should not only be familiar with, but also understand the work processes of every employee in his division, as well as the OHS requirements of these in order for him to carry out thorough work place inspections. The fact that some employees feel that inspections do not take place regularly, together with this statement by Darryl raises questions about the ability of management to manage their OHS duties in line with OHSA and the OHS management policy in the division effectively. Theminkosi's views on employees being inspected by management is, "I can't say, but when the manager is walking around, I'll assume that we are inspected to see if we are working safely" (Colt Hourly Paid Employee, 8 July 2005).

The lack of managerial concern about OHS in some divisions is evident throughout this discussion. It is also evident that OHS inspections do not take place regularly; therefore, OHS is not a constant part of managerial principles, practices and priorities. The management in the colt division are not creating an effective OHS vision for the division and for attaining their goals. The goals of the employees are also not aligned to the OHS goals of management, as the diagram in section 3.4 makes evident, resulting in managements' attempt to create a safety culture failing. The effect produced by the attitude and actions of managers' regarding OHS has a visible effect on their employees. Managers who have a high regard for OHS encourage the same attitude in their employees.

The situation in logistics can be contrasted to that of the colt division regarding the inspection of equipment. As in the paintshop and the assembly division, equipment in the logistics division is inspected daily. Makoyi explains “we really have as I said an injury free environment” (Logistics Hourly Paid Employee, 20 July 2005). Management and employees in this division share the perception that OHS should be a constant and daily priority. It can be compared to the paintshop and assembly division, as they too described their division as being injury free. Employees are checked “almost daily to see whether they are doing their jobs safely” (Biza, Logistics Hourly Paid Employee, 20 July 2005). It is evident that inspections are a contributing factor to the development of safe workplaces. Team work between management and employees is said to be an essential element in ensuring safe working conditions in the logistics division. The practices that management has adopted towards OHS contribute positively to OHS in this division and employees are eager to maintain these conditions.

Although bodyshop employees described their working conditions as being dangerous in section 4.2, their equipment is inspected “once a month” according to Luvuyo (Bodyshop Hourly Paid Employee, 25 July 2005). Maintenance also comes and conducts surprise inspections. Bodyshop is described as a low accident zone by Patrick, “I don’t remember any accident on our line” (Bodyshop Hourly Paid Employee, 25 July 2005). Employees are also checked on a routine basis to see whether they are doing their jobs safely as Ricardo mentions,

I would say management deals with hazards that’s here so they do comply. Employees are routinely checked (Bodyshop Hourly Paid Employee, 25 July 2005).

Management is realising that workplace inspections have a significant role to play in the development of safe conditions of work for employees. However, the style that management adopts towards OHS in their divisions, together with whether or not they integrate OHS into their managerial practices and principles completely, affects the manner in which they conduct these inspections. It is evident so far that the aim of some managers is to maximise profits, while other aspects of the company such as OHS take a back-seat, as made apparent in section 3.4. Some managers have adopted an authoritarian

managerial style, as they suppress OHS disagreements or simply ignore it resulting in employees having no voice in OHS matters in the company. Even though communication between management and employees is encouraged regarding OHS, not all managers look after the OHS concerns and needs of their employees. A possible reason could be management's assumption that their solutions are acceptable to all the parties. A second possible reason could be management's initial aim of wanting to limit the process solely to them providing employees with information rather than promoting two-way communication.

These structures are determined only to benefit management, providing them with more control over the views of the employees. A third possible reason is that managers feel that employees lack the adequate knowledge and skills that are required for meaningful suggestions to be implemented. A further possibility is a lack of open communication and listening between management and employees as communication is only one way: top-down. Managers are at times not willing to listen and provide support to their employees. They are also not willing to hear problems and receive feedback regarding the effectiveness of their systems. It can be argued that for some managers, OHS structures and procedures exist for the mere reason of ensuring that discipline and order are going to be maintained on the shop floor and to prevent labour unrest. This provides further evidence for the previous discussion in section 3.6.4.

It is a concern that in some divisions employees are not aware of management performing regular inspections to see if they are carrying out their work processes in a safe manner. The actions of management have a visible impact on the practices of employees regarding OHS and on OHS policy provisions itself. The seriousness with which some employees and managers view these inspections is evident in their low injury and accident rates. Employees would benefit from participating fully in all the OHS structures that are provided by management rather than becoming involved in the communication initiatives. It would allow them to take ownership of OHS if it is not prioritised efficiently by their managers.

4.4 EMPLOYEE PARTICIPATION INFLUENCING THE DEVELOPMENT OF SAFE WORK PRACTICES

Employees in the paintshop participate in the development of safe work practices, as Carol puts it “there is a checklist where they ask the employees’ questions and we have to fill it in and say what the problems are on the line” (Paintshop Hourly Paid Employee, 5 July 2005). Safety concerns of the employees are shared with team managers, but they often fall on deaf ears, as Thabo makes evident, “but not often, only sometimes do team managers listen” (Paintshop Hourly Paid Employee, 5 July 2005). While one of management’s objectives is integrating OHS into their managerial practices, it must be considered that managers are faced with other broader challenges and objectives besides OHS. The form of participation adopted by managers in this division is pseudo-participation as OHS is discussed between the two parties, but only the input of the employees is sometimes excluded when managers make decisions. This can be seen as being manipulative as employees are expected to bring their part, but management is not obliged to use it constructively as section 3.6.1 makes evident.

The attitude that management adopts towards their employee relations contributes positively to OHS in this division because the employees are not aware of the underlying principles of these strategies and they assume that they are being provided with participative schemes. In order for a process to be participative, employees must also possess the ability to influence decision making. All the employees in this division caution their fellow employees about unsafe work practices. The rules and regulations pertaining to OHS are reviewed and communicated with employees weekly by divisional managers and team managers. Andre notes that this “encourages employees to become involved in health and safety decision making” (Paintshop Hourly Paid Employee, 5 July 2005). The employees show an evident lack of understanding of participation with the result that managements’ participative initiatives require critical review.

As in the paintshop all the employees in the assembly division participate in the development of safe work practices. According to Maritz, this is achieved through employees sharing feedback or ideas. If “there is anything that they come up with, they tell the Team Manager, Harry, and then he follows that up with maintenance” (Assembly Hourly Paid Employee, 7 July 2005). Again, in this division employees are not participating, but rather communicating with employees, confirming the discussion in section 3.6. Employees in the division share their safety concerns with their team manager as employees do in the paintshop. It is noted that the team managers do listen, “but it’s just blocked on the other side, so it’s a slow response from their side” (Quinton, Assembly Hourly Paid Employee, 7 July 2005).

It is evident that each department has their own experiences of the same situation based on the manner in which management perceives and reacts to their OHS concerns. The only way employees in this division find out about safety “is when maybe a company brief comes out somewhere on the system you know, telling us to attend that meeting” (Quinton, Assembly Hourly Paid Employee, 7 July 2005). It is emphasised by management that in this division, structures are communicative in nature rather than participative, as these practices relate to communicating to the employees rather than involving them. It could be said, confirming the argument in section 3.6.3, that management introduced these as a means of securing employee involvement as it creates a general cascading effect of two way communications between management and employees.

This only provides employees with a miniscule amount of influence over decision making. However, it benefits management as employees are committed to these processes and accept them. Team managers are also able to pick up concerns and grievances in their infancy, allowing management to chart their response. This division lacks adequate communication channels for OHS between management and employees, as section 4.3 makes evident. The practices and actions that managers use to manage in this division are producing a negative effect on OHS. However, this does not mean that

management is downplaying the importance of OHS or that it is not part of their managerial principles.

One of the many possible reasons for this is that top management does not have the time to follow through on their programme on health and safety. Their OHS programmes therefore, lack consistency and past efforts made to improve OHS fade away. This is evidence to the previous discussion in section 3.5. A Joint system of decision-making and communication must be developed between management and employees, as there is a difficulty in this division with information filtering down from the safety representative to the shop floor. It has been suggested to the health and safety representative by Quinton that

when you have a meeting, take somebody (an employee) from the shop floor and let them be aware this is how serious it is. Address it as a serious factor (Assembly Hourly Paid Employee, 7 July 2005).

OHS rules and regulations are reviewed with employees at ten-minute meetings on a regular basis. With improved communication arrangements and the institution of participative initiatives, employees will be more aware of the OHS activities in their division.

The situation at the Colt division can be contrasted to that in the divisions discussed so far. Darryl and George agree that employees at the colt division do not participate in the development of safe work practices. Evidence to support their claim, according to Darryl “is by being a spray-painter and not wearing your mask; you are not really looking after yourself” (Colt Hourly Paid Employee, 8 July 2005). George makes these employees aware of their contribution to unsafe working conditions by

telling them no, you must put on your masks. It can affect me even if I am not working with the paint, it can affect me. I do tell them (George, Colt Hourly Paid Employee, 8 July 2005).

The practices of some of the employees in this division result in them not being responsible for their own health and safety as well as that of their fellow employees.

Management together with employees are not prioritising OHS. Management and employees have equal blame, but employees are not hesitant to criticise management's lack of OHS concern.

Employees in this division share all their OHS concerns with their supervisors. A monthly meeting is held in which employees' air their OHS views. Andrew does not share his concerns with his team manager, but rather with his colleagues on the production line because "only if it's something that is continuous, then I will complain to the team manager" (Colt Hourly Paid Employee, 8 July 2005). A possible reason for Andrew's actions is his lack of personal power. Adding to this is the bureaucratic management system that seems to characterise the colt division. Andrew's actions contribute to the negative OHS ethos in this division. Management in the Colt division have not recognised the employees as being an important resource. It is evident that a good relationship between management and employees in this division does not exist. If concerns are raised immediately by all employees with the team manager, action can be taken. Darryl stated that "management do listen to our concerns, but they don't do anything about it" (Colt Hourly Paid Employee, 8 July 2005).

One of the many possible reasons for this is that management is casual about the chance of an accident happening. Managers often take for granted that the job activities of the employees will not result in an injury, even though they are aware of the real and possible dangers and the reality of an injury taking place. Most of the time it takes an accident to happen before anything is done about the OHS concerns of employees. Again, full participation does not exist in this division. Communication structures have been provided to employees, but they are not being effectively used. A possible reason for this, according to the discussion in section 3.6 is that often management does not have the time to involve the employees in discussions. The contribution made by employees is also discredited, as management feels that they are the experts and therefore, possess all the knowledge. George has taken action against this passiveness of management and emphasises that "if managers don't listen, then I make a hell of a noise" (Colt Hourly Paid Employee, 8 July 2005).

The health and safety representative ensures that feedback is provided to the shop floor on a regular basis, unlike the health and safety representative in the assembly division. The OHS rules and regulations are not regularly reviewed in the division by management. This is a further possible factor impacting on the low health and safety culture in the division. In the colt division management and employees have not thoroughly integrated OHS principles into the processes of carrying out their daily job tasks. There is a lack of commitment to OHS by managers and employees in this division.

Most of the logistics employees participate in the development of safe work practices. The safety concerns of the employees are shared with their team managers. Biza notes that in this division employees must say something because it keeps management informed. Management in the division do not only act on the concerns, but also the suggestions of the employees. Their concerns are shared with management in regular meetings. Biza mentions,

ja, we tell them everything: what you would want, what you like, what you don't like, so he really does listen to you. Ja, he listens to your concerns (Logistics Hourly Paid Employee, 20 July 2005).

There is evidence of full participation in this division as employees jointly decide with management regarding OHS matters. All the respondents in the division agree that safety rules are regularly reviewed with them by management. The fact that OHS is a core aspect of the managerial principles and practices in this division results in the employees being enthusiastic and constant about prioritising it. Not all of the employees caution their fellow employees about unsafe work practices. West thinks that he should not have to do this because "they should know" (Logistics Hourly Paid Employee, 20 July 2005). There is a system of open communication in this division between management and employees when it comes to OHS matters, although the same could not be said among the employees. The division would benefit from adopting a team approach as in the assembly division, when considering the attitude that West has towards OHS. In this division management is employing participative and communicative structures regarding OHS.

There is consensus in the bodyshop that employees participate in the development of safe work practices. It is important to note that the employees in this division do not efficiently differentiate between participation and communication as in the paintshop and the assembly division. What they are actually doing is communicating more than participating with management. Employees make it evident that there are other influences that do produce an effect on the extent of their participation such as the weather. Ricardo explains this further by making evident that the employees are required to wear over-alls because of the sparks and the heat in the body-shop, but they do not adhere to these requirements because of the climate. When it is hot outside, the bodyshop is hot inside. When it is cold outside, the bodyshop is cold inside. Employees have made apparent that they have

spoken to the safety department, the health and safety department. They have been here testing climate controls, but they have done nothing yet. What they just do is put up fans, but it's no use (Ricardo, Bodyshop Hourly Paid Employee, 25 July 2005).

Safety concerns are regularly shared with management as it is done in all the other divisions. The team manager has been described by the respondents as being a good listener, who concentrates a lot on safety, although top management are seen to be one of the factors contributing to the slow reaction. OHS representatives have a regular opportunity to attend safety meetings when they do occur and they then pass the necessary information down to the shop floor. The team manager ensures that the minutes of the OHS meetings are displayed in the green area. Luvuyo shares that, "I can just go to the safety rep and ask him anything" (Bodyshop Hourly Paid Employee, 25 July 2005). This division is not struggling to effectively use the communication structures that exist between the safety representative and employees as opposed to the situation in the Assembly division, where there is a communication deficiency between the safety representative and the employees. However, a communication deficiency does exist between management and the employees. According to Ricardo, "we don't often have safety meetings" (Ricardo, Bodyshop Hourly Paid Employee, 25 July 2005). Luvuyo

shares this concern by re-emphasising “we don’t often have safety meetings” (Bodyshop Hourly Paid Employee, 8 July 2005). Ricardo goes on to say,

to be honest when we have them it’s almost like I don’t see the use of safety meetings we have here because the process has problems. The process just breaks down. So I am not happy! (Bodyshop Hourly Paid Employee, 25 July 2005).

Patrick notes that safety rules are not regularly reviewed with employees. Ricardo agrees with Luvuyo that the time and the venue of the safety meetings are such that not all the employees are able to attend, as the meetings take place before production time. Employees consult over their OHS concerns with their divisional and team managers, with the aim of reaching consensus. Managers in this division need to reaffirm their commitment to OHS in their division and be accountable to their OHS responsibilities. Top management in chapter six, affirms that they are not routinely monitoring whether production managers are complying with the OHS requirements and provisions of the company. This could possibly be one of the reasons why OHS standards in the five divisions are unstable. Top management has also identified this particular area as one of their challenges.

Not all of the employees from the various divisions feel responsible for their health and safety or that of their co-workers. This is evident in the attitude of West in the logistics division. Most of the employees from all five of the divisions are willing and able to go beyond the call of duty on behalf of the safety of others. Most of the employees routinely perform actively caring and or safety behaviours for the benefit of others. Most of the managers in the divisions are successful in creating a climate or a culture that actively fosters meaningful employee participation in the entire safety programme. They also encourage employee participation at all levels in the company.

There is a definite need for systematic face-to-face communication channels through the line of command, through which groups of employees are informed of aspects of management’s OHS principles, practices, attitudes and actions; and how it affects their roles and responsibilities. Management needs to communicate and inform employees

timely of these aspects (Slabbert, 2003: 10-7). It is important to receive feedback from the employees regarding their views on how the OHS procedures and structures are working. Through this process, all lines of management are provided with an idea of how their OHS infrastructures are being viewed by the employees and the areas where their objectives are not being met are highlighted.

The manner in which employees outline their role in OHS is an important factor for management to consider. This outline either impacts management's OHS systems and practices, negatively or positively. This is made evident in the next section. Some employees hold the opinion that it is solely management's duty to ensure that high OHS standards are set and practiced, while for others it is a team approach. Therefore, the manner in which employees define their roles and responsibilities in OHS has a definite effect on OHS in general in the company.

4.5 EMPLOYEES' SUPPORT FOR MANAGERMENTS' OCCUPATIONAL HEALTH AND SAFETY PRACTICES

The fact that management has a duty to ensure safe working conditions has been outlined extensively in section 3.3 and is agreed upon by all the paintshop employees as Thabo put it, "I mean it's their workplace and they are liable if anything happens to you" (Paintshop Hourly Paid Employee, 5 July 2005). According to Carol, "employees take all their concerns to management and abide by the rules and regulations that is in the green area" (Paintshop Hourly Paid Employee, 5 July 2005). All the employees agree that the OHS rules and regulations drafted by top management protect them and encourage them to work safely. Andre affirms this by saying:

Definitely! They protect me (Paintshop Hourly Paid Employee, 5 July 2005).

Thabo's view on this is:

occupational health and safety rules and regulations have been made so that we can be in a safe working condition. Therefore, company's efforts: yes of course, yes of course they have encouraged me to work safely (Paintshop Hourly Paid Employee, 5 July 2005).

Although a small percentage of employees disregard the OHS rules, it is conclusive that the majority support the safety programme. It is evidence to support the argument made in section 3.5 that if top management is committed to OHS and they prioritise it efficiently, they will ensure that it trickles down to the shop floor management and ultimately the employees. Shaun says that his support stems from the fact that "there is a lot of communication and team work between management and employees in this division" (Paintshop Hourly Paid Employee, 5 July 2005). Carol and Thabo agree that management is committed to OHS "because of the training they are giving employees" (Paintshop Hourly Paid Employees, 5 July 2005). Andre says that management is "ninety or ninety-five percent committed" to OHS in the division (Paint-Shop Hourly Paid Employee, 5 July 2005). However, the one improvement that Andre would make to OHS in the division is:

to get the employees more involved in OHS. That must be involved with safety to the environment or to themselves (Paintshop Hourly Paid Employee, 5 July 2005).

Carol makes the following suggestion:

I think that the safety person should come down to the line and come and check. He should be like the health and safety rep for one day and then he can come and see what is going on, on the floor (Paintshop Hourly Paid Employee, 5 July 2005).

All the employees in the paintshop have a primary goal of wanting to be safe workers as well as wanting to ensure that the conditions in which they are working are safe. It can be argued that the employees are emphasising the lack of adequate contact between themselves, their team managers, divisional managers and the safety department.

Assembly employees agree that it is not just management's duty to ensure safe working conditions, but rather that "it's everybody's responsibility" (Michelle, Assembly Hourly

Paid Employee, 7 July 2005). Every respondent states that the company's OHS rules and regulations protect them because "management supplies us with safety equipment and masks" (Thandi, Assembly Hourly Paid Employee, 7 July 2005). Management's efforts in relation to OHS have encouraged the assembly employees to work more safely, affirming the argument that managements' actions and attitudes in relation to OHS affect the attitudes and the actions of the employees. Respondents support their company's safety programme as Michelle agrees by saying

Definitely! Management is very positive (Assembly Hourly Paid Employee, 7 July 2005).

The employees agree that the management in the division is committed to OHS as Maritz notes:

our injury rate is very low here. It proves that the management are really committed (Assembly Hourly Paid Employee, 7 July 2005).

Common goals shared by all the employees in the division are to ensure that they remain healthy, that they work in a healthy and clean environment and that they aim for a zero-injury rate to employees.

All of the employees in the colt division do not agree that management has the responsibility to ensure safe working conditions. Andrew thinks that it is "absolutely managements' duty to ensure safe working conditions" (Colt Hourly Paid Employee, 8 July 2005). Employees that hold the view that it is not just management's duty think that "it's all of our duties not just management" (Darryl, Colt Hourly Employee, 8 July 2005). The employees agree that the company's OHS rules and regulations protect them and encourage them to work safely. This is emphasised by almost all of the respondents in the various divisions. George's view on this is:

Exactly! Yes they do, they do protect us (Colt Hourly Paid Employee, 8 July 2005).

All the employees support the safety programme of the company at large. George's reason for supporting is "it's one of the safest companies in the East London area" (Colt

Hourly Paid Employee, 8 July 2005). Andrew only supports certain aspects of his company's safety programme: "everything is written on the walls that I support, but more verbally; it should be improved more verbally" (Colt Hourly Paid Employee, 8 July 2005). The employees recognise management's commitment to OHS, but they feel that it can be strengthened. Andrew thinks that this can be achieved through performing walk-a-bout's once every two weeks instead of once a month. The one improvement that these employees would make is summed up by Darryl as follows,

you see the way we work, lets go to the work-side. We do have in our area spray-painting areas. Spray-painting is taking place on the line and that is one of the hazards. Because it is that fumes, it affects other people. That is one of the things I would take away from the line (Colt Hourly Paid Employee, 8 July 2005).

Theminkosi does not agree with Darryl as he thinks that the OHS structures do not need improvement as he argues

I don't see anything that needs to be made better. It's very good at this stage (Colt Hourly Paid Employee, 8 July 2005).

These employees share a common goal of wanting to keep their workplace safe so that they are in an environment where they feel safe, however their actions can be contrasted to this goal.

Logistics employees share the view of most of the other divisional employees that its management and employees' duties are to ensure safe working conditions. As Makoyi puts it, "I will say yes it's management's duty, but everything can't, it's also employees' duty" (Logistics Hourly Paid Employee, 20 July 2005). It is agreed in the division that the OHS rules and regulations protect employees and they encourage them to work more safely. Michael's reason for supporting the safety programme is that

it's helping me to stay healthy here most of the time. Since I have been working here, they are a good company (Logistics Hourly Paid Employee, 20 July 2005).

Biza supports management's OHS initiatives "one hundred percent" (Logistics Hourly Paid Employee, 20 July 2005). Biza's view is that DCSA East London is the one company that he knows, knows about safety. West is proud of the company's OHS programme and supports it because "I mean if you take a look at the records; there hasn't been major accidents, so I think that they are doing a good job" (Logistics Hourly Paid Employee, 20 July 2005). Employees feel that management is committed to ensuring safe working conditions. However, it must be considered that OHS incidents are only one factor contributing to an effective safety culture. There are also many other areas contributing to it where management has not ground themselves firmly yet. These have been referred to in the previous sections.

Some of the improvements that employees would introduce in their division would be to ensure that every employee works according to the safety standards outlined by management, such as wearing the correct PPE. They also share the desire to participate more in OHS matters in the division. This has been a common factor that has been identified by the employees in all the other divisions in previous sections discussed so far. The commitment of management in this division has trickled down to the employees. This is evidence to support the argument that managements' actions and attitudes in relation to OHS do have an effect on the employees. This will ensure that no employee is injured and their workplace will be a safe one.

Bodyshop employees believe that it's not just management's duty to ensure safe working conditions, although they recognise that managers do have overall control of OHS structures and procedures. Luvuyo emphasises what the other divisional employees have stated by mentioning that

employees have an important role to play. Right now, it takes two to dance (Bodyshop Hourly Paid Employee, 25 July 2005).

Patrick is the only respondent in this division who agreed that the company's OHS rules and regulations protect him and encourage him to work more safely. Ricardo says that these rules and regulations protect him "in a very minor way" (Bodyshop Hourly Paid Employee, 25 July 2005). Management's efforts have not encouraged him to work more safely as he says

I am going to be very honest again and say that things are not done thoroughly. And it all starts, I would say by management because they are the people that must provide health and safety in the company. So my answer is still negative (Body-Shop Hourly Paid Employee, 25 July 2005).

Luvuyo agrees with Ricardo by adding "not all of them protect me" (Bodyshop hourly Paid Employee, 25 July 2005). There are boards outside with rules and regulations regarding the PPE everybody should wear when entering the bodyshop, but

some of the top management, they don't wear long sleeved over-alls and not everybody is wearing long-sleeved over-alls in here, but they are going through sparks. So what is the point of these things they are putting up? (Ricardo, Bodyshop Hourly Paid Employee, 25 July 2005).

Employees in this division are doubtful about the credibility of their managers as role models in relation to OHS by questioning why they should adhere to the signage and not management. There is an evident deficiency in leadership skills as the actions of some managers portray the characteristics of the table in section 3.5. All the employees in the division support their company's safety programme because they consider their health and safety to be a top priority. According to Patrick "because if you are not supporting the safety programme, you are putting yourself in danger and other people" (Bodyshop Hourly Paid Employee, 25 July 2005). Safety is seen by employees as being a "critical department especially in the bodyshop" (Ricardo, Bodyshop Hourly Paid Employee, 25 July 2005). Luvuyo supports the company's OHS programme, but does not feel the same about the actions of some of the managers in relation to OHS in his division. This is made evident by the statement he makes about the commitment of his divisional management team around OHS issues

they don't practice what they preach. That's all I can say (Bodyshop Hourly Paid Employee, 25 July 2005).

Luvuyo agrees with Ricardo regarding management's commitment to OHS in the bodyshop, as he affirms that "they are not committed at all I would say" (Bodyshop Hourly Paid Employee, 25 July 2005). The evidence that Ricardo has to prove his statement is the OHS meetings as he refers back to them,

I'm gona go back again to meetings. As I am sitting here now, I think for the year, we have had two. If I'm not lying two or three (Bodyshop Hourly Paid Employee, 25 July 2005).

The employees in the bodyshop share a goal of wanting to ensure that everybody in the workplace is safe and protected so that they are able to contribute to the creation of a safe workplace environment for everyone.

It becomes evident from the employees responses that most of them support their company's OHS structures. It can be deduced that the employees in all the divisions support the company's OHS efforts, but find weaknesses in the commitment of their production managers on the shop floor in relation to OHS. Top managements' commitment has not successfully filtered down to the shop floor management. Although top management have implemented comprehensive OHS systems, some of the shop floor managers are still absolving their responsibilities. They have also started taking ownership of OHS in their various divisions in instances where their managers are not contributing to the smooth running of OHS. Although some departments are struggling to keep up with the pace of the others, it can be assumed that through improved communication structures they could find themselves catching up. Many employees are becoming more aware of the legal requirements outlined by OHS that are placed on them and their managers. Employees need to actively support this legislation to achieve their objective of creating safe working conditions.

4.6 EMPLOYEES' KNOWLEDGE OF THE LEGAL ASPECTS OF OCCUPATIONAL HEALTH AND SAFETY

The employees from the five divisions are aware of their legal responsibility, not only to ensure their own health and safety, but that of their fellow employees as well. Ricardo's understanding is that he is responsible for the health and safety of his whole team. The employees are provided with protective equipment by their team managers on a need-to-be basis. According to all the employees interviewed, there is a picture displayed in all the green areas serving as an example to employees regarding the protective clothing that they must wear in their respective areas. Employees from all the five divisions share their negative experiences of requesting protective equipment in their divisions. Quinton in Assembly says it is a fight for employees to receive new protective equipment: "you know sometimes our pants are torn or whatever and it's a big fight to get another pair of pants" (Assembly Hourly Paid Employee, 7 July 2005). Darryl a Colt employee explains that protective equipment is provided to employees once a year because of cost-saving: "these guys are more concerned about the budget" (Colt Hourly Paid Employee, 8 July 2005). It is noted in the bodyshop that "it's a problem with the team manager because what they always say is cost, they always talk about cost" (Ricardo, Bodyshop Hourly Paid Employee, 25 July 2005).

One possible reason for this is that not all companies have adequate financial resources for the improvement and development of such a programme as made evident previously in chapter three. A second possible reason is managements' willingness to spend large amounts of money on areas of the production process that do not result in direct profits. A logistics employee shared this experience by making apparent that,

you see we are having that argument with our team manager. He must change these things. These things are not always right (Logistics Hourly Paid Employee, 20 July 2005).

Ricardo says that he "very rarely gets issued protective equipment" (Bodyshop Hourly Paid Employee, 25 July 2005). This is a general concern in all the divisions. Once again

it must be emphasised that this does not mean that OHS is not a central facet of management's practices. It must be noted that management has an aim of making profit, as this is their core business. Therefore, managers need to strike a balance between these two competing priorities.

A copy of OHSA is kept on the line and in the green areas so that all the employees have access to it in their departments. Respondents are aware of their right to refuse dangerous work. Michelle has been working in the Paintshop for five years and her experience is that "I have never been treated unfairly regarding safety" (Paintshop Hourly Paid Employee, 5 July, 2005). This is contrasted to the experience of Ricardo in the bodyshop in section 4.2

Employees are in touch with the legal requirements regarding OHS. It is essential by law that employees are provided with protective equipment. It is a concern that employers in almost all of the divisions are more concerned about saving money. One could then question whether a price has been placed on the safety of employees who are being denied their right to protective equipment. Employees once again are taking a stance against their unsafe working conditions. It is essential that employees receive basic OHS training to enhance their knowledge and understanding of OHS in their line of work and their division as a whole. The more knowledge employees have about the OHS requirements of their work practices and their workplace in general the more control they will have over their work environments.

4.7 EMPLOYEES' VIEWS OF THE OCCUPATIONAL HEALTH AND SAFETY TRAINING THAT THEY RECEIVE

Employees at DCSA East London undergo some sort of training in relation to OHS, although the training provided to the health and safety representatives, is regular and thorough. The paintshop employees feel that they receive adequate training for the

various job tasks they perform on a daily basis. Assembly employees feel that the OHS training should be provided to them more often. A problem raised by employees is that,

[w]e don't really get time to leave our areas, you know, but to be relieved to go to those courses is another thing. They all say we need x amount of people to cater for in your area, but to get those guys to go, managers just don't want them to be released (Quinton, Assembly Hourly Paid Employee, 7 July 2005).

These actions and attitudes of some managers, contradicts their duties outlined by the OHS management policy. This confirms the argument made in the beginning of the chapter that what managers say in their OHS policy is incongruent with their actions in reality largely because a firm commitment is not made to OHS and neither is it a constant priority. Most of the employees at the colt division receive OHS training. Fire training is the most common form of training provided to them. Andrew is the only respondent who made evident that "no training was given to me so therefore, it is not adequate for the job that I am doing" (Andrew, Colt Hourly Paid Employee, 8 July 2005).

Half of the logistics divisional respondents have received OHS training. The OHS management policy states that "training is given to all levels of employees to enable and encourage employees to work more safely". However, Michael stated that management "never given any training to me for that" (Logistics Hourly Paid Employee, 20 July 2005). The only training that employees in this division participate in is the fire training. West has been for safety training, but he feels that "it is not adequate for the job that I am doing" (Logistics Hourly Paid Employee, 20 July 2005).

It is evident from the discussion that a training need exists in some divisions and that managers need to make OHS training specifically, a more profound aspect of their managerial practices, through effectively carrying out this duty and responsibility in terms of the OHS management policy. The evidence produced from safety inspections in South Africa demonstrates that workers lack sufficient knowledge regarding OHS. This is highlighted in section 3.7. The laws need to be strictly enforced regarding OHS training and management needs to be more consistent in its implementation of OHS training.

4.8 CONCLUSION

The working conditions of the employees at the DCSA East London plant is said to be generally safe. As the employees have noted, nothing works perfectly and there are areas where improvements can be made to the existing structures with the aim of assisting in ensuring that working conditions are made as safe as possible. A regular inspection of worksites by management is identified by all the employees as being a crucial factor contributing to the development of safe working conditions. Employees in all the divisions emphasise their desire to play a more active role in OHS structures in their divisions. It is important that the communication challenges that the various divisions are experiencing between management and employees be dealt with in a constructive manner, which ultimately benefits OHS, employees and management. Management must take the OHS concerns of the employees seriously. Employees are increasingly becoming aware of the legal requirements and protection provided by OHSA. Through the provision of only a basic OHS training programme by management on a regular basis, employees will enhance not only their knowledge, but also their understanding of OHS and their participation in these structures and procedures.

The rate at which the employees will make progress in their pursuit of safe working conditions will be enhanced by the support of the trade union. The support is dictated to by the extent to which management shapes their participation in OHS. Meaningful discussions must be led by the trade union between labour and management regarding OHS matters. This will be elaborated on in the next chapter.

5

MANAGERIAL PRACTICES AND TRADE UNION RESPONSES

5.1 INTRODUCTION

The ability of the employees to use the OHS structures provided to them by management to their own advantage depends on their organisational strength. Employees through the trade union, have the right to information about the nature of hazardous working conditions and how it is going to affect their health and safety. It is important for the trade union to negotiate this right to information. This enables them to participate in and have some sort of control over their member's health and safety. As it is made evident in chapters three and four, management is responsible for the establishment of procedures through which employees can report work-related incidents promptly, as well as channels through which recommendations can be made regarding the appropriate solutions to control the hazards that they are identifying. In the words of Roughton and Mercurio: "it is important to remember that under an effective management system, management does not discourage employees and trade union leaders from reporting safety hazards and making recommendations about incidents or hazards, or from participating in the safety programme". Salamon (1992: 476) defines trade union recognition as "the process by which management formally accepts one or more trade unions as the representative(s) of

all, or a group of its employees for the purpose of jointly determining terms and conditions of employment on a collective basis". It is already apparent in chapter four that the process of implementing participative structures has not been without challenges. Comprehensive workplace reorganisations need to be conducted, allowing the participation of employees as individuals and as a collective body through the trade union.

As the previous chapter emphasised, regular health and safety inspections must be conducted by management. The trade union should be initiating inspections based on the concerns of their members. The union should play a central role in the establishment of safe working practices and procedures. If these practices and procedures are understood and followed by all affected employees, it can lead to a reduction in the occurrence of hazards. Through such practices of the trade union being efficiently and effectively conducted, the workplace facilities and equipment are maintained and employees are prepared for emergencies through the provision of training.

This chapter aims to provide an outline of the role that the trade union is playing in OHS matters. Their role includes ensuring that their member's pursuit of safe working conditions is achieved through their support. Trade union interest in the issue of health and safety reflects concern that safety hazards be removed as far as is possible from the workplace. The extent to which the union is able to provide this support is determined by the degree to which management shapes their involvement in OHS matters.

This chapter has six components guiding the argument – i.e. 'the trade union's responses to management's actions and attitudes regarding OHS'. The first component is a discussion of the objectives of the trade union in relation to OHS. The trade union respondents emphasise that OHS is one of their main priorities and as a union they ensure that it remains one. Various reasons for prioritising OHS have been provided by the respondents. The most common is to ensure that they have a healthy workforce to produce a quality product. There is a conflict of interest regarding the OHS objectives of management and the union, but the two parties are attempting to reach consensus through

consultation. It is therefore, important to consider the extent of the participation of the trade union in OHS matters.

The second component deals with the manner in which management shapes the participation of the union in OHS matters. The union representatives participate in various ways such as attending OHS meetings with the aim of joint-decision making and being involved in the OHS structures within the company. A major contribution is made by the union to OHS through its active participation in drafting the OHS management policy of the company. They also play a role in re-evaluating and bringing about significant changes and improvements to OHS at DCSA East London. The union's level of knowledge and awareness of the legal obligations placed on them and management contributes to their active role.

The third component explores the amount of OHS awareness and knowledge that the trade union representatives put into practice, when performing their daily job tasks. Opportunities are provided to the trade union representatives by management, to enhance their OHS knowledge through initiatives such as training. A difficulty expressed by the union is their inability to send all fifteen union representatives on these courses at the same time. A report-back system is therefore, put in place by the union to ensure that information is filtered down to all the representatives concerning OHS. This information is then communicated to their members on the shop floor with the aim of informing and educating them about the OHS matters that impact on them.

The fourth component outlines the various ways in which the union communicates with its members regarding OHS matters. These include direct and indirect communication practices. An example provided is when a union representative observes an unsafe practice performed by their members and corrects it immediately. A second form of communication is the union taking on the role of mediator between management and the employees. This ensures that two-way communication takes place through relaying information such as their members OHS concerns and achievements to management. These communication practices of the trade union, aim to ensure that their members do

not accept unsafe working conditions. It is imperative that the trade union works together with management, that they support the company's OHS programme and that a system of open communication is established between management and the trade union.

The fifth component recognises the extent to which the union supports management's OHS initiatives and the manner in which they view management's OHS programme. The union's support for the company's OHS initiatives is shown through its participation in the OHS structures. A concern is raised by the respondents around the issue of production management struggling to strike a balance between their production and OHS priorities. The union is pleased however in general with the manner in which the OHS of their members is being monitored by management. A suggestion made by the union is, through more consistent attempts between management and the union to work together, most of the union's OHS challenges can be faced head-on.

The sixth component deals with the challenges currently faced by the union in relation to OHS. Challenges that are identified include non-compliance by a small percentage of production management, as well as the temporary laying off of their members by top management. The impacts of globalisation and the need to provide more systematic OHS awareness for their members are also identified as challenges. Although the union recognises the strengths of the company's OHS programme, it is felt that more emphasis needs to be placed on its weaknesses, so that improvements can be made to the programme to ensure its sustainability.

The seventh component discusses briefly the role of safety representatives at DCSA East London. A distinction is made between the role of safety representatives and that of the trade union. Then the impact that the trade union makes to the effectiveness of the safety representatives is discussed.

5.2 TRADE UNION OBJECTIVES REGARDING OCCUPATIONAL HEALTH AND SAFETY

Michael Dibela's portfolio is OHS. He states that the trade union's objective in relation to OHS is "to make sure that safety for its members is there" (Shop steward, 27 July 2005). One of the many aims of the union is seeing to it that employees work in a healthy environment with safe tools and machinery. This is in line with the requirements of the OHS management policy. This is practiced in order to facilitate a safe and healthy working environment, ultimately contributing to the implementation of the OHS management policy provisions, as Rodney Bantom explains,

as a trade union we really take the issue of health and safety very serious and uhm, it's not just for the reason for looking after our members, but also to make sure that the company that we are working for must survive in the future. So we must have healthy people. Those are our objectives (Shop steward, 27 July 2005).

Creating a safe workplace is not only for the benefit of employees, but also to ensure that the company remains profitable. It is emphasised by the union representatives that without workers, the company will not be able to operate. In an unsafe workplace environment, more expenses are incurred as management spends large amounts of resources on dealing with absenteeism, workplace hazards and accidents. It is important for management to have relevant OHS certifications in place.

Rodney Bantom further stresses that OHS is one of the union's main priorities and it will ensure that this remains one. It is highlighted by Rodney Bantom and Sandy Jacko, that whenever workers are unhappy regarding OHS and want to raise their concerns with management, the trade union deals with the issue speedily. Sandy Jacko's thoughts on the union's objectives for OHS are:

you have to have a healthy workforce so that we can reach the quality product that we require and as the company and ourselves, we are always engaging in the committees of health and safety in order to make sure that people that are producing are healthy (Sandy Jacko, NUMSA Trade Union Official, 27 July 2005).

All three respondents agree that there is nothing more important than a person's life therefore, safety comes first. There are fifteen shop stewards who represent different committees. Most of the shop stewards' working time, is taken up with human resources issues, industrial relations issues and problem solving. Rodney Bantom emphasises the fact that "when there's health and safety meetings or issues that must be dealt with, we excuse those comrades" (Shop steward, 27 July 2005), implying that OHS is of great concern. When shop stewards are provided with a report by the health and safety department marked as being urgent, it is attended to immediately. If the shop stewards feel that the matter has a direct impact on their members, they address it without reservations. There are times that the trade union body finds that they are experiencing difficulty in reaching a consensus on the matter and then turn to collective bargaining with board members, Dr Vollman and Mr Everste. The dynamics of collective bargaining are discussed in section 3.4.1.

In this way the input of the trade union is taken into consideration by management and they are granted full participation. Section 6.3.1 is a detailed outline of participation. If the two parties are in disagreement, they have the option of entering a process of bargaining in order to reach a consensus that satisfies both parties to an extent. The result is that OHS issues are not going to be decided upon as management alone sees fit. An important point to contemplate is management's primary concern with profits, resulting in competing objectives, as employees and the trade union have an interest in working in safe conditions. This has already been discussed extensively in chapters three and four. Developing safe working conditions is sometimes seen by managers as an extra expense, as OHS is paid for out of profits. The relationship between management and the trade union is inherently conflictual. Jointly agreed procedures have been established in relation to OHS, but management still reserves the right to have the final say as chapter six makes evident. It is evident through the objectives of the trade union that they regard the OHS of their members as one of their priorities. They have also, through their objectives, made clear their intention to integrate OHS into their daily job activities. Whether or not they follow through on this intention is recognised later in the chapter.

As it has already been outlined in chapter three, occupational health and safety is a subject of conflict between the union and management, creating a stumbling block for the union in their path to achieving the goal of securing safe working conditions for their members. Management is characterised as having the aim of avoiding expenditure on the parts of the production process that do not result in direct profits. An example of this is the hesitancy of management to spend money on improving ventilation in the workplace as mentioned previously in chapter four. The union's demand that work be made safe and healthy implies a challenge to the system of production that puts profits before human needs, as made evident again in chapter three. Again chapter three makes evident that during the 1980s, the slogan for COSATU was 'health before profits'. Twenty six years later, employees are still accentuating this phenomenon, by referring to the fact that managers are using cost-saving drives to absolve their OHS responsibilities. Later on in the chapter, the trade union too admits that a percentage of managers emphasise production over OHS.

There are also areas of compromise that can play in the union's and management's favour, allowing the union to achieve its objectives. An example provided by Niels Andersen, is that management's OHS efforts with the trade union do result in a reduction in accidents which reduces lost productivity time and capacity and implies a substantial improvement in working conditions. Absenteeism is reduced, worker productivity is increased and the company develops a caring image regarding their workers. Staff morale is boosted together with employee health and ultimately employees are becoming more committed to the company. According to a large percentage of the employees in the previous chapter and the trade union representatives, this aptly describes the situation at the manufacturing plant even though there are weaknesses in the system.

To ensure that the union achieves its objectives, it is essential that it actively participates in OHS matters. The unions can increase their influence at company level firstly, by participating in the drafting of policies and then implementing them at shop floor level. It is important to remember that accountability and responsibility are key elements in

achieving their OHS objectives. According to Fleur Plimmer, COSATU never had a concerted, planned programme around health and safety, but the federation and its affiliates have made some important interventions in protecting the rights of workers (cited in COSATU, 2006: 1). Such are the efforts of NUMSA in the DCSA East London plant. Trade unions such as NUMSA are assisting in raising awareness of the hazardous nature of industries. Union recognition of health and safety as an organising and mobilising tool was generally slow in the past, partly because workplace health and safety was regarded as a back-burner issue as section 3.2 makes apparent. In 1994, COSATU joined the reconstituted statutory tripartite bodies, which was the Advisory Council on Occupational Health and Safety (ACOHS) established to work with the Department of Labour's Directorate for Occupational Health and Safety and the Compensation Board (COSATU, 2006: 1). The department of labour is responding positively to the union's concerns to play a role in shaping policy at national level.

In November this year, the department convened a meeting to look at ways of developing national policy (COSATU, 2006: 2). This impacts on DCSA East London, as NUMSA is an affiliate of COSATU and they want to implement the provisions of these policies on the shop floor. This only results in possible benefits for their members if the policies accord with managements' OHS principles. This is not yet happening in the workplace firstly, due to the limited ability of employees and the union and secondly, it has been noted in chapter six that the trade union representatives have no real understanding of OHS in the workplace and some managers have stated that the union has no genuine interest in OHS in the organisation. Again in chapter six, a few managers make it evident that the trade union has not yet developed the ability to formulate an effective programme for engaging in health, safety and environmental issues. Most times the trade union takes up OHS issues as a result of pressure from the employees on the shop floor. The union is experiencing difficulty in mainstreaming OHS because it only becomes a topic of discussion when there is nothing else to talk about. Michael Dibela confirms this by saying, "occupational health and safety is prioritised by the union when the need arises". This statement emphasises that the trade union is reactive rather than proactive to OHS matters in the workplace.

Even though the trade union's involvement in OHS has evolved compared to the past, it has not primarily changed the working conditions of employees at DCSA East London. Health and safety legislation is an important and necessary weapon for the union to promote OHS in the workplace. Unless these laws are efficiently enforced, many employers treat them casually and do not comply with them as already made evident in chapters three and four. The provision of healthy and safe working conditions depends on the trade union assisting in the development of a comprehensively healthy and safe company.

COSATU suggested that OHSA be restructured to include the following aspects among others:

- The full disclosure of OHS information.
- Ensuring trade union representation on safety matters.
- Strengthening the right to refuse dangerous work.
- Ensuring COSATU representation at all levels, on all health, safety and environmental forums.

These aspects of restructuring have an impact on DCSA East London because of NUMSA'S affiliation with COSATU. Implementing these advances will result in increased OHS monitoring, benefiting employees. These have been successfully filtered down to the shop floor, but not without weaknesses as chapter four makes evident. However, it will take a strong trade union dedicated to OHS, to be successful. At national level, unions are able to participate in many tripartite committees covering a range of issues from the regulatory framework to research and occupational health matters. Trade unions have formed a labour caucus and are now in a better position to influence decision making and policy issues around health and safety in the workplace. This has already been made evident in chapter three. The trade union's achievements at DSCA East London serve as an example of this. They play a role in drafting the OHS policy of the company, they are represented on safety matters, they do however need to review their

strength in order to efficiently strengthen the right of employees to refuse dangerous work and they are represented on all OHS forums.

The trade union must organise itself, ensuring that management makes work healthy and safe. However, not all trade unions have a great interest in furthering the OHS gains of their members, resulting in such opportunities not being explored to their full potential. The trade union at DCSA too, is still falling short in some areas. The challenge faced by the trade union is to ensure that all managers are obliged to get organised to fulfil their responsibilities to provide appropriate workplace health and safety services, conforming to minimum standards. However, this is not happening as effectively as it should in all the production divisions, as chapter four makes apparent. One of the many possible reasons for this is the trade union having good achievements in safety, but deficiencies in knowledge and awareness of safety issues. The outcome is that the trade union is not able to recognise, evaluate and eliminate OHS hazards, resulting in them not being able to relay information back to management so that an appropriate response can be made. This influences the trade union's ability to actively participate in the planning process with management regarding OHS. A team approach to OHS is not developing between management and the trade union.

This is evidence of the trade union not having the ability to effectively implement the requirements of national policy at a company level. One of the many reasons for this is the manner in which management shapes their relationship with the trade union. Without the union exerting pressure, management often regards low health and safety standards as normal for the workplace. It is up to workers to protect themselves. Pressure for improvements to working conditions must come from the workers, through the strategic participation of the trade union in OHS matters.

The trade union needs to seriously review the efficacy of their inspection and enforcement of health and safety standards in some of the production divisions as one of their objectives. A crucial aspect to consider is the trade union leadership not having the basic skill of understanding the individual chapters of OHSA and what they mean in

practice. They may also lack the basic communication skills required to convince management to improve the working conditions. These aspects have a direct influence on the extent of the trade union's participation in OHS matters, apart from the strategies that management uses to shape its involvement.

5.3 PARTICIPATION OF THE TRADE UNION IN OCCUPATIONAL HEALTH AND SAFETY MATTERS

The union participates in OHS firstly, through ensuring that the environment in which the employees are working is safe. Secondly, is through their participation in the OHS meetings held between themselves and management. These meetings take place on a monthly basis and are attended by Michael Dibela regularly. In these meetings management and the union make decisions relating to OHS. Through the existence of these structures, management is able to make use of the strategy of gaining a collective employee reaction to their OHS initiatives. This is achieved through the structures that are set up in the workplace between the shop floor workers and the trade union as Sandy Jacko mentions that

the health and safety structures start on the shop floor. On the line you have got representatives directly in production where people are working. Issues are discussed there that are affecting them in their departments. The issues are then uplifted and reported monthly in the divisions. From the divisions it gets escalated to quarterly risk management meetings where the real decisions are taken about a problem that we experience in that period (Sandy Jacko, NUMSA Official, 27 July 2005).

This strategy also results in management having the ability to contain conflict as the problem is sorted out immediately or in some cases not. Employees in chapter four have stated on more than one occasion, that management has not yet removed OHS hazards from the shop floor. Adding to this dilemma are the shop stewards and the health and safety representatives of the area reacting casually to the hazards, leaving employees no foot to stand on when raising such concerns. Even though problems or concerns are

escalated, it is clear that managers exercise their right to make the final decision, as they decide to react to it or not. This narrows the scope of the union's participation in OHS matters, reducing it to mere pseudo participation mentioned in section 3.6.1.

The trade union, together with management drafts the OHS policy of the company. There were many stages in this process as Rodney Bantom outlined involving consultants, including doctors conducting presentations to the leadership of the company. In this research the leadership refers to the relevant board members representing management and the leadership of the trade union. Management and the union then separately compile aspects that they each want to include in the policy. The shop stewards take the document to their leaders, NUMSA officials, to ensure that the OHS terms and conditions to which they have agreed are correct, or whether aspects should be removed or amended. The result is that the OHS policy provisions are set for the company and they are agreed to and understood by both parties. Sandy Jacko makes an important statement,

I think whenever you are doing anything there is that time when you have to get a few individuals from each stakeholder inside the company so that they can come up with a draft. Then we discuss any changes that need to be made to it. It then becomes a policy after it is tabled (Sandy Jacko, NUMSA Official, 27 July 2005).

COSATU, of which NUMSA is an affiliate, states that the primary function of management's OHS policy must be prevention rather than cure. It is evident throughout the chapters that, although this is one of the aims of management, they often do not achieve it, as they find themselves doing mostly reactive work. The changes and amendments that COSATU suggests be made to an OHS management policy is pushed in the company by NUMSA impacting on OHS in principle, but not in practice. For this reason the trade union is not effectively recognising, evaluating and eliminating occupational health hazards at the source, although it is one of their primary goals. The trade union representatives at DCSA East London are attempting to carry out this practice in the company, but are challenged by their lack of adequate knowledge.

When confronted with the question 'what role does the union play in re-evaluating or bringing about changes and improvements to OHS in the organisation?' Michael Dibela's response is "so far we are satisfied with what the company is doing" (Shop steward, 27 July 2005). The union representatives of this company can either be genuinely satisfied with management's contribution to OHS or they lack the adequate knowledge and confidence to challenge management. The impression given from this statement firstly, is that the union is not playing a part because OHS is of the greatest standard in the company, resulting in the union seeing no room for improvement. A second of the many possibilities, is that management has developed a sweet-heart relationship with the aim of avoiding and suppressing any conflict from arising. Through this development, management can avoid confrontation and questioning by employees in relation to OHS, once again reserving their right to have the final say.

A third possibility is the union's inability to initiate OHS discussions with management, resulting in them sitting back until its members or parent union initiate something. Therefore, the actual value and the contribution that the trade union is making to certain aspects of OHS can be questioned, confirming the view of managers in chapter six. Although the union is aware of the OHS requirements in terms of national policy, they are not filtering it down to their members effectively due to the many challenges and constraints faced by them as previous sections of this chapter have already made evident. The union lacks the adequate OHS knowledge and expertise to face their challenges head on. However, the union attempts to bring about changes and improvements, but this is largely driven and initiated by their members rather than their leadership as Rodney Bantom indirectly confirms,

we do because the union, when I talk union, I mean the workers on the shop floor. They are directly on the line. Say for example when people are busy welding, there is a lot of fumes, then the union always inform management that the masks that we are using now, it seems that we can still smell the fumes coming through. So it's like a message sent to management (Shop steward, 27 July 2005).

Rodney Bantom feels that the union is making a difference in creating a safe work-place environment for their members. They are currently making a concerted effort to ensure that workers are using the correct equipment for the jobs that they are doing and that OHS not only remains a central aspect of production, but also of their principles and practices. Rodney Bantom notes that the union is only able to make a difference to OHS because of management allowing them to be a part of the process of drafting the OHS policy. According to the union, there is transparency between management and the union in this regard. The union then makes the plan available to their members and ensures that they understand the provisions of the plan. However, a concern has been raised earlier in the analysis concerning the low level of OHS knowledge of the trade union. If the union is not familiar with the basics, how effectively do they pass on OHS knowledge to their members? Secondly, how valuable is their influence when participating and deciding with management regarding OHS? Thirdly, if they are so ignorant, why is management encouraging their participation?

A possible reason for all these unanswered questions is to avoid and stamp out conflict at the source, benefiting management. This can also be seen as a strategy used by management to ensure the collective commitment towards OHS by the employees through the trade union. The management in this company are complying with the requirements of OSHA and beyond; and have a specific OHS policy for their workplace that the trade union is unable to question or find fault with.

In the words of Purcell (1981: xvii) "power, centralisation, consensus and trust are essential process elements in the achievement of good industrial relations". This is evident in the actions of management in relation to the trade union. Management has created a situation in which the power relationship between management and the trade union seems balanced. They allow centralised bargaining and there is a high level of trust between management and the trade union. There is also a general agreement regarding their relationship. Managers have managed to emphasise these factors and use them to their advantage in their relationship with the trade union. Management is making sure that their structures cannot be criticised by the trade union. Through these strategies of

management, a relationship based on trust is developing with the union. This is evident throughout the chapter. Management has ensured that their OHS policies and procedures are well organised so much so, that they impact on the type of relationship that exists between them and the union, it impacts on the extent to which the union's objectives are achieved or not, which in turn affects the extent of their participation in OHS matters, further impacting on OHS as section 5.2 makes evident. On the surface the strategies and practices of management are equally benefiting both parties, but when examined closer the underlying dynamics become evident and it can be said that management's strategies all have an aim of benefiting management.

It is evident that OHS is one of the unions many priorities, but not the first and foremost. The trade union is assigned a central role in the implementation of OHS procedures by the government, but their role is strategically shaped by managers. Management benefits from building well developed and well grounded relationships with the union. Management is encouraging the union to share in its OHS responsibility. However, without adequate OHS knowledge, the union's participation can be described as being pseudo, rather than full. This results in a negative impact on OHS structures in the company, providing management with an opportunity to place just enough emphasis on OHS rather than what is required in the workplace. Sufficient OHS knowledge is the tool that will provide the union with the necessary power to participate effectively in OHS and ultimately to achieve their goals. Therefore, the union's involvement in OHS can be described as being more reactive than proactive at this stage.

5.4 OPPORTUNITIES CREATED BY MANAGEMENT FOR THE TRADE UNION TO INCREASE THEIR OCCUPATIONAL HEALTH AND SAFETY KNOWLEDGE

The union representatives are regularly provided with the opportunity to attend workshops to improve their OHS knowledge and understanding. The union members avail themselves for all training. Rodney Bantom identifies a difficulty that they are

experiencing as shop stewards. He says that it is difficult to send all fifteen shop stewards on the training courses at the same time, as some have to look after employees on the production line. Every Wednesday the shop stewards that attended a course provide the rest of the team with feedback, so that the information can be filtered down to the workforce. The respondents agree that “when it comes to training, this company is taking out: let me say spending money for people to be aware of occupational health and safety issues” (Rodney Bantom, Shop steward, 27 July 2005). In this regard, management is attempting to fulfil their duties and responsibilities according to OHSA, as well as the company’s OHS management policy. However, the manner in which the trade union representatives are making use of this newly acquired knowledge must be questioned.

The understanding of the trade union is that it is management’s responsibility to develop a company that promotes employee health and safety. Providing the union with OHS training is only one way of doing this. A second method is for management to fulfil their broad responsibilities under OHSA, through “employing or having access to a multi-disciplinary team including occupational hygienists, health and safety officers, health and safety educators, safety engineers and other scientific and technical staff in the health and safety field” (Mpolokeng, 2001: 1). In the opinion of the trade union representatives, management has employed such specialists who are accessible to the union, with the aim of increasing their OHS knowledge.

They serve as communication tools for the union to inform their members about OHS developments useful to them. These specialists are contributing to the level of knowledge of the union representatives regarding OHS. The union representatives realise that in order for them to ensure the health and safety of their members, they have to continuously consult with these health and safety experts to keep up with the OHS changes in the motor-manufacturing industry. However, the environmental specialist has invited the union to these meetings, but “they never avail themselves” (Deidre Freeman, Environmental Specialist, 27 June 2005). Through the union regularly exercising this practice, positive influences can be made to OHS in the company. An aspect to consider is that management may not have sufficient resources to conduct continuous training

initiatives to improve the OHS knowledge of the union representatives. This will be further explored in chapter six. This can be one of the possible reasons for the basic OHS knowledge of the union.

It is imperative that the union leadership have a sound knowledge base of OHS so that they can share their knowledge with their members. A union with poor OHS knowledge is not as beneficial for its members as a well informed union. The union must have sound communication strategies with its members regarding OHS matters, so that it is able to act as an information source for its members. This is an area in which the trade union representatives at DCSA East London, lack adequate competence.

5.5 COMMUNICATION PRACTICES USED BY THE TRADE UNION TO INFORM ITS MEMBERS ABOUT OCCUPATIONAL HEALTH AND SAFETY MATTERS

The shop stewards continuously remind their members about the importance of wearing protective equipment such as safety boots, goggles and earmuffs. Michael Dibela ensures that “the area in which employees are working, especially the floor is not oily because they can easily slip and break their legs you see” (Shop steward, 27 July 2005). Rodney Bantom provides an example of the manner in which he communicates his OHS concerns to employees:

I am the shop steward in the Body-Shop. The only thing that I must also make sure that as a representative is whatever they must wear as protective clothing, it is also my duty to tell them that you need to wear your safety goggles. So I am also trying to asses the situation because we deal directly with cases” (Shop steward, 27 July 2005).

The union representatives are very sensitive about health and safety issues. It is evident throughout this discussion, that the trade union is not only focussed on OHS for the benefit of their members, but also for that of management. The reason for this is in the following quote, “those are our members and it’s the company’s employees” (Rodney

Bantom, Shop steward, 27 July 2005). Divisional meetings take place weekly in which managers have opportunities to report on the injuries and OHS concerns of the division to the union. The response of the union to this information is dependent on the amount of OHS knowledge that they have and exercise in their daily job tasks. This ensures that employees are well aware of their right to safe working conditions, in line with OHSA and the company's OHS policy. The extent of the gains made for employees through this practice is questionable.

Michael Dibela says that "we always speak to employees during our tea breaks and lunch breaks" (Shop steward, 27 July, 2005). In his view, most employees are aware of this right according to OHSA, as most of them do not accept any condition that is out of line in terms of safety as chapter four made evident. The employees immediately approach their health and safety representative or the shop steward of their division when something is out of line. The efficacy of safety representatives is also questionable. Rodney Bantom's opinion is that the union's responsibility to ensure that employees are aware of this right is crucial, not only for the benefit of the employees, but also for the company to survive. Indirect communication also takes place between the union and the employees through the distribution of pamphlets. OHS awareness campaigns also take place regularly in the company. These are outlined in detail. Employees are made aware of OHS through the actions of their fellow employees. An example of this is provided by Rodney Bantom, "people also notice that the person that he was working with five, say ten years, is no more that healthy person and they now work more safely and encourage their fellow mates to work safely" (Shop steward, 27 July 2005). Previously, employees were not coming forward with their OHS concerns to the union, but they are realising now that through maintaining their own health and safety, they ensure their own survival and that of the company.

The second indirect communication practice employed by the union is through management catering for the immediate needs of employees who become injured while performing their daily job tasks, through the provision of a bio-kinetic specialist. This provision made by management, makes a positive contribution to the union's OHS

practices. When employees strain their backs or endure some sort of physical injury, they are transferred to the Wellness Centre. The specialist assesses the kind of work performed by the employee on the line and the possible injuries that the employee can sustain. The union is pleased with this facility, as they feel that this has a positive impact on their members. However, the union recognises later in the chapter that middle management still need to be convinced of this. This structure enhances the union's communication practices, as Sandy Jacko mentions: "he is issuing booklets about the way you must sit, the way you must eat, the way you must sleep at night, everything that involves the health of the human being" (NUMSA Official, 27 July 2005). These health promotion programmes are discussed in detail in chapter seven.

The trade union with the assistance of management is actively ensuring that workers are fully informed of the hazards they are exposed to and the safety measures required for removing these hazards. It can be concluded that the union does not take the initiative of making OHS suggestions to benefit their members as much as management does. Rather, they rely on the initiatives of management to build their practices on. Without the union's involvement, no pressure is exerted on managers, who then often regard low health and safety standards as normal for their workplace. It is therefore, up to the workers to protect themselves through the involvement of the union. Pressure for improvements to working conditions must also come from the union. Through the union's participation in OHS matters, it is evident that they support management's OHS initiatives.

It is important that the union supports the company's OHS initiatives. The extent of their support for these initiatives impacts on their objectives, their participation and the manner in which they view it as being beneficial or not for their members. Although the union supports the company's OHS programme, they can also play an important role in highlighting not only the strengths, but also the weaknesses in the current system.

5.6 THE TRADE UNION'S SUPPORT FOR THE OCCUPATIONAL HEALTH AND SAFETY PROGRAMME OF MANAGEMENT

Michael Dibela notes that the union's support for their company's OHS programme is shown through their active involvement. All three respondents indicated that they support the company's initiatives one hundred percent. Micheal Dibela affirms management's efficiency in regulating health and safety standards by saying,

yesterday we had a meeting with them. Amongst other things we spoke about safety and health. During the past three months, there were only three minor injuries. That alone shows their efficiency (Shop steward, 27 July 2005).

Rodney Bantom provides a contrasting view of the manner in which management prioritises OHS as he says, "hey that's a tough one" (Shop steward, 27 July 2005). He expands his thoughts by mentioning "to be honest with you, production first to some managers" (Shop steward, 27 July 2005). It is made evident that ten percent of managers refuse the requests of their employees to go to first-aid and or for a medical examination. Hank van Rensburg affirms this by making apparent that "on the health side, I can't do it immediately, but the safety needs to be attended to immediately" (Assembly Divisional Manager, 14 July 2005). Managers insist that employees first complete what they are assigned to do. Employees have also identified this as one of their challenges in chapter four. Rodney Bantom emphasises that the union is currently attempting to deal with this. This is evidence of management's inability to integrate OHS principles effectively in their daily actions and practices, resulting in their failure to abide by the OHS policy provisions. This provides further evidence for the discussion in section 5.2 regarding the inherently conflictual nature of OHS. Sandy Jacko says these managerial practices create hurdles for the union in their attempt to achieve their objectives in relation to OHS, as well as their participatory ability in OHS.

The manner in which health and safety is monitored by management is pleasing to the union. As Micheal Dibela affirms,

I don't think there is a better way than what we are using. The challenge is maintaining it (Shop steward, 27 July 2005).

Sandy Jacko mentions that NUMSA and management are trying to make sure that workers remain healthy. They are aware of the pressures placed upon management in a global world, where it is crucial that the company provides the right product at the right time and at the right price. A healthy workforce is therefore needed, in order to produce this and management is doing their best to ensure this.

The union is taking cognisance of the fact that OHS is one of management's priorities. This point is highlighted by Rodney Bantom and Sandy Jacko as they mention, "ja, number one, it's one of them and they know that" (Shop steward, 27 July 2005). Once again the trade union leadership affirms that while OHS is one of management's priorities, it is not always at the top of the list. The management in the company are accountable and responsible to their duties outlined by OHSA and they have also achieved overseas OHS certification through NOSA, although they are experiencing difficulty in implementing these requirements effectively. Through more consistent attempts to work together with management, the union can play a more prominent role in ensuring that management puts into practice what they have intended to do in the OHS policy.

As mentioned in section 5.3, the union has an important role to play in contributing to the effectiveness of an OHS programme. This role is played through them supporting management's OHS actions and programmes. The union is facing various challenges which affect the contribution that they are able to make towards OHS. It is therefore, more important that the union focuses on these challenges to ensure the sustainability of their role in OHS. The challenges that the union is currently facing are discussed in the next section.

5.7 OCCUPATIONAL HEALTH AND SAFETY CHALLENGES FACED BY THE TRADE UNION

Non-compliance by management and the workers is identified as a contributing factor undermining the implementation of OHS in the company. Currently, the union is facing a number of challenges. One of these challenges is that a large percentage of their members have been 'offered' to go on temporary lay-off by the company because of there being no light duty work. From a financial perspective, these people are not "worst off" according to Rodney Bantom (Shop steward, 27 July 2005). The real challenge is therefore, not a financial one, but rather discovering the reason behind workers coming to work healthy and leaving unhealthy. Workers are then put on temporary lay-off for two years and told that there is no light duty work, resulting in them being placed on permanent disability. The union is not happy with this and request that the company offers their members an alternative. Rodney Bantom understands the complications of light duty as he says,

like I know, when it comes to light duty for a person with a back problem, you cannot say light duty for that person will be sitting down in front of a computer. It will also have strain. To stand it's also strain, to bend, to do anything is strain (Shop steward, 27 July 2005).

The real challenge then is that the company is moving forward in a global market where people are needed that are able to run at the pace that the company will be running in the next two years. In Rodney Bantom's view, "to be honest now, you don't really need people that will not run at the pace you are going to run in the next two years" (Shop steward, 27 July 2005). A possibility is that the actual challenge that the union is facing is how to get rid of their members who will not be an asset to the company for much longer? Another challenge that the union is facing is making sure that their members remain on medical aid, even though they are laid off. Rodney Bantom makes it clear that the union is not asking management to offer their members package deals, but rather that, "they must still be employed by the company till the day when they are no longer" (Shop steward, 27 July 2005). This is one of the key challenges that the union is facing.

A second challenge faced by the union is their attempt to educate their members so that they are able to use the OHS structures provided to them in the correct manner. A possible solution for this, of the many, is that the trade union must investigate the area in which their members lack adequate OHS knowledge, before implementing intervention strategies. The amount of time it takes to assess the current levels of knowledge and awareness among employees is a factor that requires careful consideration. This practice is a prerequisite for any future advancement for the union's members. Sandy Jacko's opinion is that the company has a good OHS programme and workers must come forward with their OHS concerns. The programme is said to be effective and its success only possible through the participation of the employees. It must however be considered that employees are not participating, as they feel that managers are not listening and nothing is being done about their concerns, as chapter four makes evident. This is one of the negative impacts on the OHS programmes of management and the initiatives of the trade union.

Strategies need to be developed by the union to deal with these challenges. One of these strategies can be a more effective method of integrating OHS into their practices. Once again the level of OHS knowledge is crucial for both the union and its members to overcome the difficulties they are facing. Together with management the union needs to find the appropriate solution to maintain the current OHS programme implementation. One of the possible agents to aid in this process could be to improve the OHS knowledge and role of safety representatives. Their inadequacy has been a concern for many.

5.8 SAFETY REPRESENTATIVES

Important agents also in this chapter are the safety representatives, which include the health and safety representatives and the staff committee representatives. A health and safety representative is defined as an employee who has been elected to represent the views of the employees on health and safety issues in the workplace. The primary objective of safety representatives is to identify unsafe working conditions and to try and

eliminate them. It is imperative that they are proactive when looking at the workplace and identifying possible hazards. An important distinction is made by Errol Scheepers:

staff committee is not like the union. We are a consultative forum (Staff Committee Representative, 4 July 2005).

Staff committee representatives ensure that the staff – i.e. the monthly paid employees, are well aware of their right to safe working conditions. The manner in which they perform their duties is paramount in determining how effective they are in enforcing health and safety policies in the workplace. One of the objectives of the staff committee representatives is

complying with all the relevant standards you know, the law. That is definitely one of them (Bert Williams, Staff Committee Representative, 18 July 2005).

Ensuring that the policies and the procedures of the company are being adequately adhered to forms part of this objective. Continuous improvement is a second focal area. The third is ensuring that “good occupational health and safety relations exist between management and staff (Harold Xaso, Staff Committee Representative, 5 July 2005).

The staff committee representatives participate in decisions regarding occupational health and safety in conjunction with the safety representatives in the company. This is confirmed by Harold Xaso as he makes apparent: “I would say we’ve got a very big part in that because there are staff representatives and there are health and safety representatives in each department” (Staff Committee Representative, 5 July 2005). Management is able to communicate health and safety related matters to the staff through this structure, in order to find out whether or not the staff have any objections to policies that are being implemented. This is then consulted over, so that an agreement can be reached. Staff committee representatives attend monthly divisional and departmental meetings with management. They also attend weekly safety, health, environment and quality meetings with management. An example of the kind of impact they make is provided by Errol Scheepers,

If a secretary is forced to carry twenty boxes of paper up the stairs and she trips, we would rather recommend that we put in a goods-lift to try and alleviate her load. That kind of thing we look at (Staff Committee Representative, 4 July 2005).

OHS issues are prioritised by the committee so much so that “we try to make sure that our safety items are running before we even run the plant, you know” (Bert Williams, Staff Committee Representative, 18 July 2005). Through these communication structures, employees and staff are made aware of their right to safe working conditions. NOSA campaigns have also been run by management as well as the distribution of posters and pamphlets by the safety representatives.

According to the opinions of Harold Xaso and Errol Scheepers, the staff committee representatives are not facing any challenges in creating a safe work environment by saying “I wouldn’t say there are any barriers at the moment” (Harold Xaso, Staff Committee Representative, 5 July 2005). On the contrary, Bert Williams argues that “the only thing I can really think of is cost” (Staff Committee Representative, 18 July 2005). In essence according to him, the challenge is to find a cost effective way to put the safety measures into place and maintain them.

Bert Williams and Harold Xaso would “not change much” to improve the current state of occupational health and safety at DCSA East London (Bert Williams, Staff Committee Representative, 18 July 2005). They agree that management is complying in every possible way to make the workplace as safe as possible. Harold argues that their current OHS systems just need to be sustained and maintained at the level they are currently at. The staff committee representatives agree that they are taking a proactive stance to OHS, rather than a reactive one.

Staff benefits from such structures as it “improves their quality of work” (Bert Williams, Staff Committee Representative, 18 July 2005). The bodyshop has a large number of weld guns that give off a lot of heat. To improve the working conditions, the committee

suggested that the work areas be provided with proper circulation, such as fans. An interesting advantage is singled out by Harold Xaso,

the other benefit is to represent, for instance most of the workers here are my colour, so it's easier for them to approach me when there is a problem other than maybe somebody of different colour. So they have got that advantage and we talk about this (Staff Committee Representative, 5 July 2005).

Training is not provided to the staff committee representatives, as it is only scheduled for health and safety representatives. They receive regular training and they receive certificates. Bert Williams affirms this by adding that the training is on-going "it never stops" (Staff Committee Representative, 18 July 2005).

It is agreed upon by all the staff committee representatives that the management of the plant take OHS very seriously. Improvements are taking place all the time, "I can't say that things are stagnant and things are not happening because they are" (Bert Williams, 18 July 2005). Harold Xaso is proud of his company

because it takes you know, really big priority in the health of people. I would say even in the East London, if there are any companies who are of health things, we might be the leaders (Staff Committee Representative, 5 July 2005).

The trade union has a definite impact on the effectiveness of health and safety representatives firstly, as the health and safety representatives are also members of the trade union and secondly, the union represents them in consultations with management regarding OHS. The shop stewards appear to play a more prominent role in OHS compared to the safety representatives. This is evident in the accounts of the employees in chapter four. However, a criticism of the trade union is that they only have the ability to orientate themselves to the short-term goals of monitoring OHS, as well as not having the ability to successfully monitor the OHS preventative measures introduced by management. Safety representatives are not adequately trained on health and safety issues, they are unable to contribute meaningfully in OHS committee meetings and they

do not have the necessary technical skills to monitor the workplace. Therefore, professional experts are also involved such as the medical department and the biokineticist.

5.9 CONCLUSION

Workers, unions and safety representatives need to use the participative structures that have been established in their place of work relating to OHS to their advantage. The trade union leadership needs to inform workers that participating in these structures is in their interest. One possibility of curbing the autocratic styles of management regarding participation in OHS is through progressively eroding management's prerogative to determine working conditions, resulting in employees having a more comprehensive understanding of OHS matters. This can only be achieved through increasing the level of knowledge and awareness of the trade union representatives regarding OHS in the workplace and stressing the role of the trade union in OHS matters more meticulously.

According to Slabbert (2000: 16) three options face the union when dealing with the manner in which management shapes their participation. The response that the union has chosen is to become involved in the participative schemes of management. The reality at DCSA East London is that the union is not yet strong enough to develop effective practices to participate successfully. The trade union's main objective should be to promote the OHS interests of the employees. They need to be the instrument through which employees can consult with management. However, it seems as though the union is participating blindly, resulting in negative and positive outcomes for their members, as they are not able to use the participative schemes to their advantage. For many, it may seem that the union has identified itself with the objectives and the goals of the company, rather than that of their members on the shop floor. The inherently conflictual nature of the relationship between the trade union and management seems to be ignored in the accounts of the union representatives. This leads to the assumption that the trade union is participating in these structures only because they have accepted the process as being legitimate. The choice that the union has made also requires them to give their members a framework and organisational backup of their OHS plans. This aspect has been

achieved by the union (Ntshangasa and Solomon, 1993: 32). It is for this reason that the option that the union takes, must build on its collective strength, its structures and its tradition of report-backs and mandates.

It is evident that the practices that managers use to shape the involvement of the union in OHS issues are impacted on by their attitudes and actions enabling them to dictate the extent of the involvement of the union in OHS matters. The trade union therefore, needs to develop strategic responses to management's practices, but more importantly to their strategies. The trade union lacks the appropriate knowledge and skills to assist them in enhancing their OHS practices to challenge the impact that managerial strategies have on them and to challenge the role that management is currently playing in OHS.

Milgate argues that many factors impact on the effectiveness of safety representatives. These factors can also be said to impact the effectiveness of managers in creating safe workplaces through implementing the provisions of the OHS management policy. Included in these factors are managerial commitment, trade union involvement, training and information, the provision of safety equipment to employees, effective communication practices, employee participation and the infrastructure of the company (cited in Burger 2006: 159). Some of these factors have been discussed in detail in previous chapters, while the discussion of the rest will follow in the next two chapters. The involvement of professional experts, such as the fire and the medical departments are important in the prevention of work related incidents.

Through management's actions and attitudes, an outline can be drawn for their own role in OHS structures in the company. However, through the use of various actions, management has the ability to manipulate their role in carrying out the provisions of an OHS policy. These manipulations can either be positive or negative. The dynamics of management and their OHS role is discussed in the next chapter.

6

MANAGEMENT AND OCCUPATIONAL HEALTH AND SAFETY

6.1 INTRODUCTION

It has been made evident throughout the chapters so far, that the manner in which managers' carry out their duties and responsibilities has an impact on the standard of OHS within the workplace as well as the actions of employees and the trade union. This impact has the ability to result in positive outcomes, but it also results in conflict and tension. Most South African workplaces are best suited to institutionalise conflict through their establishment of joint structures with the union and the use of collective bargaining to build relationships with their employees and establish equity as made apparent in section 3.4.1. It is important for management to develop programmes to ensure effective interaction between themselves and their employees as section 3.6 made evident. Management needs to accept that their workplace consists of employees who have different aspirations, interests and goals relating to health and safety, resulting in conflict being inevitable in this relationship. Managers must recognise this conflict, as it will serve as a basis for them to regulate conflictual issues such as OHS, as discussed in chapter three. A successful OHS management programme is implemented through top management's active and aggressive commitment to the safety process. The participation

of management and employees through their safety representatives compliment each other and form the core of the health and safety programme.

Managers have a central role to play in OHS within a company, as chapter three discusses. It is their responsibility to ensure that structures and procedures are created to enhance OHS in the workplace. Management's OHS practices must be guided by legislation with the primary aim of benefiting OHS within the workplace.

The managerial structure and function in relation to OHS is the first aspect dealt with in the chapter. A brief summary of the provisions of the OHS management policy at the time of the research exists. Each managerial line has different roles and responsibilities, but they have one common goal in relation to OHS. The specific contribution that the plant engineer, the environmental specialist and the safety specialist make towards OHS is discussed. The application of the OHS system's provisions drafted by management must be monitored on a continuous basis, especially in the production environment.

The second aspect to consider is the role of production managers in maintaining high OHS standards in their environments. This is achieved through them conducting regular OHS meetings with their employees of which the aim is filtering relevant OHS information down to the shop floor. Production managers firstly, have a responsibility to encourage employees to support their function and secondly, they have the responsibility to actively challenge unsafe working conditions on the shop floor. The three lines of production management are the manufacturing divisional manager, the divisional managers and the team managers. An overview of their roles and responsibilities in relation to OHS is discussed in detail in this section.

Although these managers have different responsibilities in the production environment, they share a common goal of maintaining high OHS standards, despite the challenges they face. The challenges faced by production managers include the careless actions of employees contributing towards the creation of unsafe working conditions, the educational level of the workforce, training initiatives and resources. Production

managers are taking the initiative to strategise a response to their challenges. It will become evident through the practices, actions and attitude of management that there is a relationship between a manager's attitude and actions towards OHS and labour productivity. This was touched on briefly in chapter four through the experiences of the employees in the various divisions. The production managers are commended for their OHS systems that they have in place by the safety specialist.

Each line of production management has different responsibilities therefore they face different challenges resulting in their differing attitudes towards OHS. It is evident throughout the chapter that their attitudes have a direct impact on their OHS systems and practices. This again was briefly discussed in chapters three and four. Through consistent efforts of collaboration between production managers, positive contributions can be made to the OHS management system of the company.

6.2 THE PROVISIONS OF THE SAFETY, HEALTH, ENVIRONMENT AND QUALITY POLICY

Top management holds the view that prioritising OHS makes good business sense due to the company needing to achieve its objectives. This point is also emphasised by the trade union in chapter five as well as the various echelons of production managers. In order to obtain these ideals, managers make continual efforts to optimise the working environment for themselves and their employees. Top management states that a carefully devised framework of safety precautions and regulations has been implemented. The preservation of the environment is also a priority of the company, as the environmental management system has been integrated into their OHS management system. This is made evident by management in section 6.3.

The safety, health and environmental management policy was drafted by integrating it with the requirements of NOSA. It is emphasised in DCSA East London's safety, health and environmental policy (an abstract of it is found in appendix B) that management has

committed itself to integrating safety, health and environmental management into all of their company processes with an emphasis on their production processes. According to Dr Clifford Panter, the environmental protection guidelines of the DaimlerChrysler group dictate the manner in which production takes place. These guidelines are binding on all DCSA employees and facilities (Safety, Health and Environmental Management Policy, 2004). Each of the five manufacturing divisions within DCSA East London defines and can implement additional environmental objectives and targets, in order to ensure that continuous improvement processes are carried out. The company believes that it is of fundamental importance that management takes the responsibility for the safety and health of the employees as well as that of the environment (Safety, Health and Environmental Management Policy, 2004). In order to achieve this, their safety, health and environmental function is integrated into all management actions and activities on a daily basis.

Management provides the following reasons for having an OHS department. The first reason deals with the legal requirements placed on the organisation. The most important pieces of legislation being OHSA and the Compensation for Occupational Injuries and Diseases Act (COIDA), govern their actions. OHSA places obligations on management to implement OHS structures and procedures. Management is obliged by legislation to ensure that their structures and procedures:

- assist in preventing work-related illnesses and injury;
- have the ability to manage injury-on-duty cases;
- allow a medical system to be put in place;
- provide the necessary structures to manage HIV/AIDS in the workplace; and
- fulfil their obligation of maintaining a health promoting work environment (Panter, 2005: 1).

The second reason centres around what management has termed business reasons, as they provide the company with benefits which include:

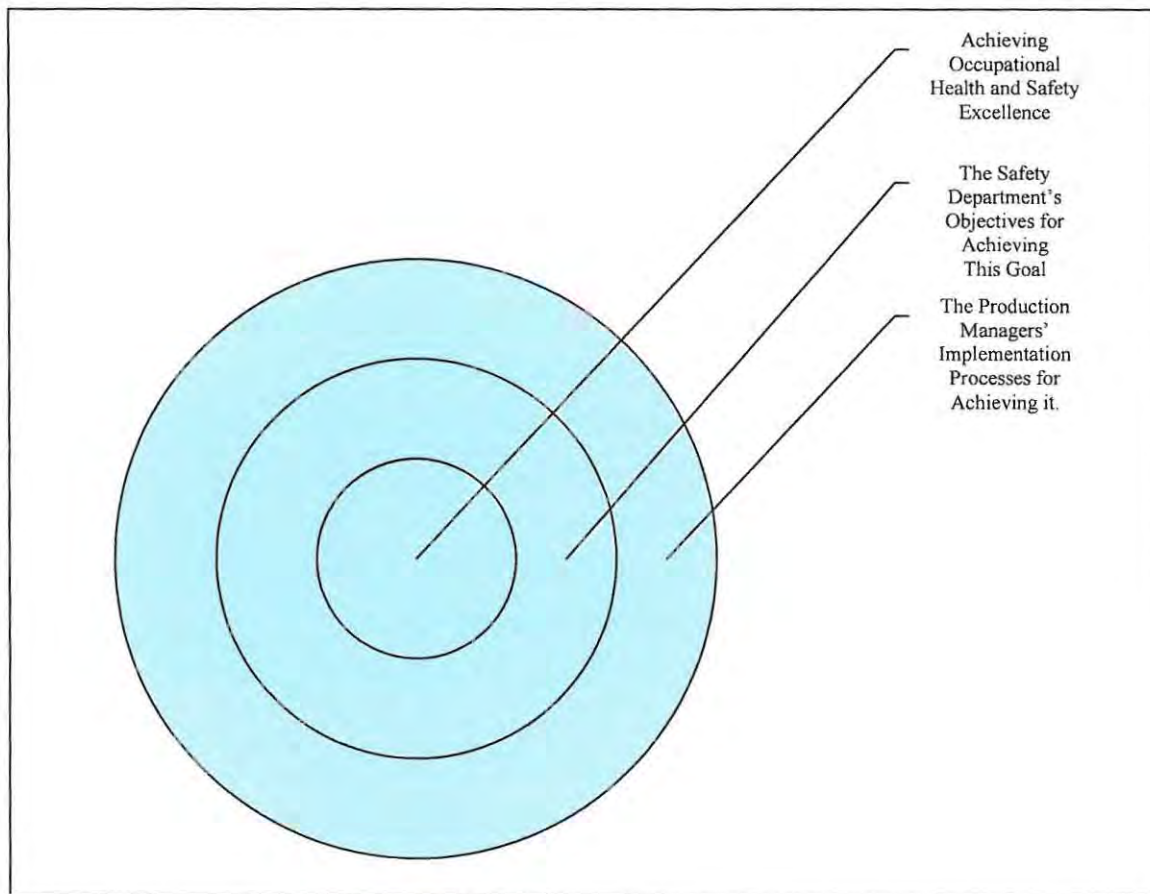
- the ability to manage absenteeism;
- the company is able to manage incapacity through industrial relations procedures;
- the capacity to implement an integrated SHE system at a NOSA standard;
- the ability to support the development of an HIV/AIDS workplace programme;
- the capacity of the organisation to manage disability claims;
- the capacity of the health management system promotes wellness; and
- the provision of a support service to the employees own medical practitioners (Panter, 2005: 1).

These benefits will be discussed in more detail in chapter seven. The OHS management policy, together with legislation provides the basis upon which the actions and attitudes of management are based. The structure and function of managers in relation to OHS need to have the ability to support and implement these provisions.

6.2.1 Outlining the Managerial Structure and Function in Relation to Occupational Health and Safety

In the diagram below the centre represents the goal of all managers' which is to attain and maintain high OHS standards in the plant. Each of the echelons of management has their own steps in place to achieve this goal. The OHS management policy is drafted by the executive and senior management, together with the trade union leadership, as already stated in chapter five. The safety department ensures that managerial systems are in line with the legal requirements in relation to OHS, while production managers execute the provisions of the OHS management policy on the shop floor. The tensions and conflicts between the various functions of managers must be considered even though they all have an interest in securing the OHS of the plant. These tensions and conflicts are referred to throughout the chapter.

Figure 6.1: Occupational Health and Safety Goals of Management



It is important to consider that managerial practices and principles operate at different levels. Even though comprehensive OHS policies are drafted, they are not always implemented and practiced by management as chapters three, four and five make apparent. Managers are faced with unique challenges which affect the OHS policy

provisions being filtered down the levels of management. It is important for this reason to focus on the interaction between managerial practices and the government's expectations of a company's management, through legislation in relation to OHS. The different managerial lines react differently to policy implementation. The challenges faced by management are discussed throughout this chapter, as the introduction stated. Even though each manager has a different function in terms of OHS, their managerial practices must be based on common principles.

Ross Jacobs is the plant's Safety Engineer. His key responsibility is to ensure that every OHS requirement in terms of OHSA and the company's OHS management policy is implemented in the plant. He has a number of responsibilities and practices including the following:

- Identifying the training needs of the employees in relation to OHS.
- Ensuring that the employees comply with the OHS management policy provisions.
- Determining whether or not audits are being carried out and if accidents are reported, that they are investigated and addressed.
- Evaluating the safety systems that are put in place.
- Ensuring that safety meetings are conducted regularly.
- As chair of the Risk Management Meetings, he also provides the divisional managers with feedback regarding the statistics of the safety, health and environmental management policy, specifically looking at how well the plant is performing in relation to the provisions of this policy.

The SHEQ policy "is signed as an acceptance at a high level, in other words a CEO level" (Ross Jacobs, Plant Safety Engineer, 20 June 2005). It has therefore been endorsed by the board members and senior management who promote it throughout the company. According to Deidre Freeman, the policy ensures that management protects the OHS of all the employees in the workplace, as management has the primary responsibility of

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OHS in the workplace. Ensuring the protection of the environment is one of the central aspects of the policy's provisions, as it has only recently been integrated into the policy.

The Environmental Specialist, Deidre Freeman, has recently become involved in the health and safety aspect of the plant. Her key responsibility involves taking care of the environmental aspects of the plant, as well as ensuring that the managerial system aligns to OHSAS 18000 certification standards. For this reason, managements' systems are said to be integrated, as the environmental specialist has a close working relationship with the safety officer.

Vernon Moonieya is the Safety Officer of the plant. His responsibility includes securing general safety within the plant. Periodic walk-about and audits are performed by him to ensure that the OHS standards set, are being enforced and to determine whether or not they are being adhered to. Vernon Moonieya instructs divisional head walk-about with the aim of encouraging an open communication channel between management and employees. This creates a cascading effect starting from the shop floor and cascading upward to management, ultimately performing an overview of everything related to OHS. It is for this reason that statistics are collected from the medical department of minor injuries, disabling injuries, accidents, fire statistics and training statistics. These statistics provide the safety specialist with a synopsis of OHS on the shop floor. He can also determine whether or not management and employees are facing OHS challenges, resulting in the specific statistics being produced.

The plant engineer, the environmental specialist and the safety officer are part of the safety department. This line of management agrees that their integrated management system "is strategically a good thing" (Vernon Mooneiya, Safety Specialist, 30 June 2005). The safety department does not only evaluate risks, but also identifies the controls to minimise or eliminate the risks. This results in a complete risk analysis being carried out on every single risk and potential risk. Ultimately, management at a high level makes sure that their systems are in place, audits are conducted and that the performance of the SHE management system in the various divisions is monitored for effective

implementation. Through effectively carrying out their OHS practices, managements' actions contribute positively towards carrying out the provisions of the OHS management policy. Successful companies ensure that OHS is incorporated into all functional areas of the operation. A large percentage of managements' commitment to OHS is strong, resulting in a successful management system developing through its continuous improvement and its sustainability. Their ability to ensure that the production machinery, material and methods used by the employees facilitate the development of a safe and healthy working environment is another benefit to OHS. The safety department also ensures that the safety, health and environmental function are completely integrated into production managers' practices and principles.

Andre de Beer has over-all responsibility for the application of the SHE management policy in the plant. He shares a close working relationship with the plant engineer, who also has the authority to approve or make changes to the OHS policy, as well as the OHS managerial system. This ability is crucial, especially when immediate changes need to be made to the system after an evaluation process. The workplace environment is ever-changing therefore OHS policies especially are in line with these changes. A second area of focus for Andre de Beer is ensuring the safety of the plant generally, such as looking after the maintenance of the plant's roads, lights, offices and other general maintenance that is required to keep a plant running. Andre de Beer co-ordinates the carrying out of external audits so that shortcomings are identified and a programme developed to eliminate them. He attends the Action Centre meeting with Ross Jacobs, Vernon Moonieya, Deidre Freeman, the rest of the plant leaders and the divisional production managers. Andre de Beer confirms that this results in achieving and maintaining high level OHS goals.

One of the key OHS goals of the company is to ensure that production manufacturing is safe and in line with the requirements of OHSA, together with the OHS management policy provisions. Ross Jacobs explains that, "the company as an organisation promotes a safe and comfortable working environment to all of its employees, thereby enhancing, supporting and complying with the legislative requirements" (Plant Safety Engineer, 20

June 2005). Management's ultimate goal is to ensure that all employees comply with these policy provisions. Management is impacted on negatively if the provisions of these policies are not enforced because "the employees on the shop floor won't become passionate about those requirements" (Plant Safety Engineer, 20 June 2005). A specific method of enforcement employed by management is through the training and development of their employees in relation to OHS.

According to the environmental manager, top management is faced with the challenge of determining the amount of resources that should be allocated towards achieving their OHS objectives. Deidre Freeman mentions that, it is costly for management to operate an OHS system that ensures the company has adequate funding, together with the knowledge of how to run the system effectively. A barrier identified by Deidre Freeman to improving OHS in the company, is a lack of knowledge regarding the OHS requirements in terms of the company's OHS policy and OHSA among employees. Management therefore, has the responsibility to train their employees and reinforce the training that employees have already received. One method of dealing with this challenge is for companies to plan effectively by ensuring that their OHS objectives and targets tie in with their financial planning. Secondly, is to ensure that current training is provided to workers. Through management spending large amounts of money on training, they promote the development of the employees as individuals, as well as a collective workforce.

Top management supports the view that they are not able to separate OHS from their portfolio because it is their responsibility to ensure that employees are provided with a clean, safe and comfortable working environment. They must ensure that the health and safety of any other person is not affected by the acts or the omissions of their own employees. Therefore, management cannot exclude it from their responsibility. Deidre Freeman adds that OHS cannot be separated from top management's responsibility, as it is clearly explained and entrenched in the SHEQ policy. According to Vernon Moonieya, managers who separate it are fools because legislation dictates that the responsibility of OHS lies with top management.

It is apparent so far that there is a high level of managerial commitment and leadership towards OHS. This top-down commitment from management is the most important part of the process in ensuring that OHS activities are successful. This type of effective safety system can be developed and sustained in any workplace through managers demonstrating their commitment and providing the needed resources.

It is imperative that OHS systems are evaluated on a regular basis in order to assess their strengths and weaknesses. These can only be identified once the systems are active and it is top management's responsibility to ensure the smooth running of these systems. This managerial line has a good balance in being proactive and reactive to OHS matters that arise. Andre de Beer confirms this by mentioning that

we try very hard to improve our systems and look for opportunities for improvement, which is much more on the proactive side. Audits and incidences that occur are reacted to by management and it is felt unanimously that we have a good catch net in the event of something going wrong (management representative for safety, health and environment chairperson, 26 July 2005).

OHS must never be separated from top management's responsibility. Vernon Moonieya has the opinion that if OHS is not driven by top management, it won't always be accepted by the employees on the shop floor. This affirms the argument made in section 3.5. On the contrary, employees are also known to be the driving force behind OHS initiatives in situations where management does not see the value of such programmes as made evident in chapter four. Management is accountable for every single injury or incident in the plant and it is in their interest to have their fingers on the pulse of what is going on, in terms of OHS. OHSA clearly states "where reasonably practicable management is responsible to make sure that they do everything they can, to ensure that their people work in what is considered safe working conditions" (Vernon Moonieya, Safety Specialist, 30 June 2005). Vernon Moonieya is affirming the legislative provisions of OHSA discussed in section 3.3.

For management to do this successfully, they need to enhance and approach their OHS practices from a managerial perspective as well as an employee perspective. It must also be considered that the strategies used by management are from a managerial rather than an employee perspective as chapters four and five make evident. Managerial practices aiming to meet the individual needs of the employees are based on the extent to which they think they should be meeting the individual needs of individual employees, including those of an OHS nature. Management must show concern in identifying the right of employees to express their views or influence management's decisions, especially in relation to OHS. A system of full participation as discussed in section 3.6.1 is necessary for this to be successful.

Managerial principles that are characterised by a co-determined institutional framework must be adopted, as it is made apparent throughout the thesis so far that participation is a central aspect requiring consideration in OHS issues. It is emphasised in chapters three, four and five that for some production managers, production issues always take precedence regardless of the circumstances. This is evidence of the inherently conflictual nature of the relationship between management and employees, especially in relation to OHS. The principles underlying the production managers' actions and attitudes include building constructive relationships with employees as individuals as well as a collective body through the establishment of OHS briefing groups between themselves and the employees on the shop floor.

However, it must be noted that chapter four made evident that these are more communicative in nature rather than participative. Therefore, these consultative structures it can be argued are set up with a somewhat manipulative intention, as management share their plans with employees in order to gain a collective employee reaction or commitment. This results in production managers' possessing the ability to develop alternative OHS practices depending on the response of employees. It must be considered that while management is receptive to the input of the employees, they still reserve the right to make the final decision. These structures have a principle aim of benefiting management. This was discussed in detail in chapter three.

An appropriate managerial style to employ is one that supports an equal partnership in the sense that management's right to manage is not opposed by their right to engage in co-decision making with employees and to jointly decide with them on issues including OHS. Management and employees have the right to firstly, initiate and contribute to change secondly, the responsibility to consider initiatives from each other thirdly, the responsibility to establish an industrial relations system which recognises both conflict and co-operation fourthly, which seeks to achieve mutually acceptable OHS settlements and finally, which recognises mutual dependence. It is increasingly apparent that management is providing employees with a role in establishing, implementing and evaluating the safety programme. Allowing the employees to participate in OHS matters assists them in developing and expressing their safety commitment to themselves and their fellow workers.

Each managerial line has a different function in relation to OHS, resulting in them responding differently towards the OHS management policy provisions. Production managers have a responsibility of implementing the policies drafted by top management. In a production led environment OHS easily takes a backseat.

Production managers have become a central part of the SHEQ structures in the plant, as the OHS policy has a direct impact on them and they have a direct impact on the policy. Essentially, production managers either adhere to the requirements of the policies to a certain extent or they ignore them. The operational manufacturing divisions fall under Niels Andersen as he is the Manufacturing Divisional Manager. He ensures that the divisions have their monthly OHS meetings and he also filters down relevant OHS information to the divisional managers who in turn pass it down to the team managers.

6.3 IMPLEMENTING THE PROVISIONS OF THE SAFETY, HEALTH AND ENVIRONMENTAL POLICY BY PRODUCTION MANAGERS

Many obstacles prevent production managers from effectively carrying out the provisions of the OHS management policy. Each manager faces unique challenges and therefore, has unique practices and strategies in place to counter their challenges. The context in which their practices, actions and attitudes are placed is constantly changing, making the flexibility of these an important aspect to consider. The challenges that are therefore, faced by management have a direct impact on the practices that they choose to manage OHS with in the company, with the aim of creating safe workplaces.

6.3.1 The Manner in Which the Manufacturing Divisional Manager Ensures That Occupational Health and Safety Remains a Priority within the Production Environment

Niels Andersen is the Manufacturing Divisional Manager and he has the authority over the operational manufacturing divisions. He ensures that the five production divisions have their monthly OHS meetings. The Action Centre Meetings as well as the quarterly risk management meeting is attended by him. His objective is “to achieve the plant’s objectives of meeting the five star standards of NOSA and to remain within the OHS Act” (Manufacturing Divisional Manager, 11 July 2005).

Information pertaining specifically to OHS is filtered down from Niels Andersen to the divisional managers through him performing walk-about on a weekly basis and in the Action Centre Meeting mentioned above. Non-conformance in relation to OHS is reported at this meeting and controls are immediately put in place. Niels Andersen emphasises the transparency of his OHS managerial system. Although OHS information is not personally transferred from him to the shop floor, he affirms that “I am getting enough feedback on the walk-about as to the understanding and acceptance of that” (Manufacturing Divisional Manager, 11 July 2005). Through his actions Niels Andersen ensures that production manufacturing is safe.

He emphasises that although OHS is management's responsibility, employees are provided with the opportunity to support management's OHS function by becoming actively involved in promoting OHS awareness. Management has identified weaknesses in their communication practices. The words of Niels Andersen confirm this, "we are increasingly trying to improve the communication starting from the senior level including health and safety down to the shop floor and shop floor back up" (Manufacturing Divisional Manager, 11 July 2005). This improvement allows employees on the shop floor to provide management with feedback that can be put to constructive use and top management can be more aware of what is actually taking place in relation to OHS on the shop floor. It is noted in chapter four that the practices, actions and attitudes used by managers to manage OHS do have an effect on the way employees view the importance of OHS. If managers show an indifferent attitude towards OHS, employees might adopt the same negative attitude and have no regard for the hazards and potential hazards in the workplace. In some divisions however, employees are taking over the OHS responsibility of management and are attempting to secure safe workplace environments, as made evident in chapter four.

At DCSA East London it is only a small percentage of management who are not actively participating and carrying out the provisions of the OHS policy, resulting in OHS not being a constant priority, as the trade union representatives in chapter five and the employees in chapter four make evident. One of the many possible reasons for this is the attitude that management has adopted towards OHS. Some managers might not adopt OHS as a value, as production is a competing priority. A second possible reason could be that managers are not being role models for their employees in relation to OHS and are portraying a leadership deficiency, as they too fail to follow a safety protocol. This is made evident in chapter four through the experiences of the employees.

The relationship between managerial actions and attitudes and labour productivity is explained by Niels Andersen. His reasoning is that managers want people to come to work and be effective at work. Management wants employees to produce vehicles on time with the least amount of re-work. Hence, workers need to be motivated, they need to

understand the OHS procedures and structures and they need to be happy and healthy. If workers are therefore, not working in a comfortable environment, management pays the price. This is the reason for Niels Andersen's affirmation of the relationship. This affirms the argument made in section 3.6.1. It is managers who shape the extent to which employees are to be integrated into the process of finding the best solution to challenge unsafe working conditions with the net result being improved productivity.

Unsafe working conditions are challenged "big time" by Niels Andersen (Manufacturing Divisional Manager, 11 July 2005). It is noted by him that if all the people under his leadership followed and understood the OHS requirements of the plant, there would be far less financial impacts. Production managers must understand that if they are able to achieve all their OHS goals, it results in the plant running better and a better quality product being produced at a lower cost. This is beneficial to both management and employees.

In the view of Niels Andersen, the biggest challenge facing all management "is that they know what they should be doing in relation to OHS policy provisions, but they don't do it" (Manufacturing Divisional Manager, 11 July 2005). Niels Andersen's view has been shared by some of the employees in chapter four. He feels that disciplinary measures are not enough to counter this challenge. It is felt by him that managers must want to do the right thing and they must want to follow procedures. This is the first step towards finding a solution to the problem. A second barrier impacting on the first barrier is the lack of understanding and acceptance of OHS requirements by employees. In the words of Niels Andersen "management needs to understand that a crucial aspect to consider is the workers education standard" (Manufacturing Divisional Manager, 11 July 2005). A possible response of the many, to this education challenge is to encourage management and employees to become more than safety conscious and to ensure that safety remains a priority through their managerial practices. A second possible strategy is the constant discussion of the SHE programme among management and employees of the plant to increase their OHS awareness.

It is evident that OHS is not yet fully integrated into all aspects of managements' daily activities. OHS must become an integral part of management's principles and practices. It is for this reason that a team approach is required when attempting to achieve OHS goals. Prioritising OHS is beneficial for management and employees because the morale of employees is boosted and profits increase because of reduced absenteeism and accidents. Managers have identified a communication weakness in their managerial practices. Together all lines of management must develop a strategy to eliminate the weaknesses and improve their OHS management systems.

6.3.2 The Role of Divisional Managers in Maintaining the Occupational Health and Safety Standards Set by the Company

The five production divisions are each headed by a divisional manager. Each of these managers acts as the health and safety chairperson of their division, making them responsible for the whole safety structure in their division. They also perform walkabouts, risk assessments and identify deviations in regard to the OHS actions of team managers and employees. They attend the Action Centre Meeting and the quarterly OHS Risk Management Meeting. All the managers emphasise their responsibility for creating a safe work environment for all employees. Robert Ray, the Divisional Manager of the Bodyshop has "responsibility for the health and safety of all bodyshop employees, as well as any other person who walks through the bodyshop" (6 July 2005). It is essential therefore, that structured OHS managerial practices are put in place through which each managerial line in the division has a delegated responsibility for a particular aspect of the practice, ultimately resulting in the provisions of the OHS management policy being practiced. Graeme Bieske describes this system as being "a well structured managerial process that has been going very, very well". (Paintshop Divisional Manager, 4 July 2005). He attributes the high OHS standards in his division to the interactive processes between himself and the team managers in the division.

All the divisional managers share a goal of achieving and maintaining an incident free division, as well as ensuring optimal ergonomic conditions. Although this line of

management feels that their OHS structures and practices are comprehensive, they are continuously looking for ways to make improvements in spite of the challenges they face. A culture challenge is being faced by Robert Ray. He refers to culture challenge as “the fact that traditionally people live differently from what the workplace actually drives into them, regarding what should take place in relation to OHS” (Bodyshop Divisional Manager, 6 July 2005). There is an industry culture outlining what management wants to achieve with regard to OHS at work. This can be contrasted to the culture that employees are exposed to regarding how they do things at home. When employees enter the workplace they need to abide by a certain set of rules and criteria, allowing the workplace to protect them and minimize injury. However, the conflict between the two paradigms arises when, according to Robert Ray

people connect up their own electricity at home as it is for free, but it’s a hell of a risk. Therefore, work and home have an influence on each other because you must shift from one paradigm to another (Bodyshop Divisional Manager, 6 July 2005).

This results in employees behaving recklessly at work and contributing negatively to OHS at the workplace. A mistake made by most managers is their desire for every single employee to conform to the required OHS behaviour without realising that there are factors influencing the attainment of this, such as that mentioned by Robert Ray and Niels Andersen. According to Niels Andersen the status of the area in which the workers live is far from first world standards, yet the plant is applying first world standards. He then poses the question “now when they walk in here, do you expect their behaviour to change?” This results in a negative impact on the OHS systems in the company in the view of Niels Andersen (Manufacturing Divisional manager, 11 July 2005).

DCSA East London can respond to this challenge by driving OHS initiatives on a continuous basis. One strategy suggested by Robert Ray is that businesses must raise the awareness of the community regarding OHS, as the community must also have a part of this responsibility. It is suggested by Robert Ray that the company look at effective strategies to achieve this goal. A third possible solution is for management to enable all levels of employees to increase their OHS knowledge and awareness by encouraging

them to work safely through training initiatives. However, management is experiencing numerous challenges in their attempt to initiate training programmes. These are discussed in section 6.4.3.

OHS awareness is carried out regularly throughout the divisions and management is encouraging employees to become involved. Management's OHS systems provide employees with the opportunity to contribute their input when the OHS system is reviewed. However, managers have the right to make the final decision resulting in the employees OHS concerns being disregarded at times, as made evident in chapter four, with the outcome being more challenges for management.

One of the approaches used by management is the health and safety representative system. The health and safety representative is updated on a regular basis regarding the OHS legislation by management. He or she has the responsibility of sharing this information with the employees on the shop floor. Goodhope Ncapo, the Divisional Manager of Colt says, "I have sharp health and safety committees that are running that report to me" (12 July 2005). This statement is incongruent with the colt division employees' experiences in chapter four, together with the employees in the assembly division also in chapter four, who have opposed this argument, put forward by management.

Management has also put up signs which are regularly reviewed with their employees. However, employees in chapter four have shared that managers do not adhere to the signage and question why they should. Continuous improvement structures are established in the green areas providing employees with the opportunity to write down their views, suggestions, questions and concerns regarding OHS. However, employees in chapter four have made it apparent that these schemes are weak and should be improved. Their view is also supported by the theory in chapter three. The divisional managerial structure holds the view that they are taking a proactive stance towards OHS through the systems they have in place.

Management is responsible for taking the initiative to address the safety concerns in their own divisions. Managers at DCSA East London have employed experts to assist in identifying training needs in relation to OHS, as well as conducting risk assessments. All employees are trained before they perform any task in the workplace. Although many employees have stated that the company spends a large sum of money on training, not many have received OHS specific training. A possible reason of the many for this is that management might tend to focus more on training employees at a higher level, resulting in a lack of skilled workers on the shop floor. This lack of skilled workers has the potential to contribute to the plant's OHS problems, as they often fail to follow safety procedures. This could be one of management's strategies to try and cut costs because they are reluctant to provide this specific training.

The divisional managers are praised by Vernon Moonieya for implementing these OHS systems, as he feels that they have done it in a responsible manner and they have taken ownership of the process. Their success also stems from them using the OHS management policy as a base for developing their own systems in their divisions. Through their efforts they are not only able to look at the division, but more specifically how their division impacts the rest of the company in terms of health, safety and the environment. However, their processes require further development in order to enhance what is currently in place.

Management needs to realise that their practices must be flexible, as employees and managers do become complacent, they take chances, they take shortcuts and they do deviate from OHS processes. There are always going to be challenges no matter how comprehensive management's systems are. Employees are always going to deviate from processes for whatever reason and that's how accidents happen. Therefore, management's practices regarding OHS need to be constantly evaluated.

The commitment of management to implementing efficient occupational health and safety policies is reflected in their values, their goals and their commitment. One of the many responsibilities of management is to establish the goals of their OHS systems and

to effectively implement, sustain and maintain them on the shop floor. Team managers have the responsibility of supervising OHS on the shop floor. They can be seen as being supervisors on the shop floor. A common concern of the employees in chapter four from most of the divisions is that the team managers often side with management, rather than with them. They (team managers) also share management's desire to meet production targets rather than focusing on OHS. Many employees also share the concern that team managers do not listen or follow through on their concerns. Team managers are in a contentious position as they are caught in the middle of aligning themselves with managements' goals or with the trade union's goals, as they too are members of the trade union.

Although implementing OHS systems is costly, management needs to implement the best practicable system with the resources that they have. Divisional managers need to be accountable and responsible for their OHS actions. Strategies need to be developed by them together with their team managers to counter the challenges that they face.

6.3.3 The Manner in which Team Managers Implement the Occupational Health and Safety Policy on the Shop Floor

It is the team managers who have the responsibility for implementing the OHS provisions on the shop floor. They are responsible for ensuring that all the employees on the shop floor adhere to the SHE policy provisions. A primary responsibility of team managers is to ensure that the working environment of their employees is healthy and safe. All the hazards in the work environment are identified and addressed immediately by team managers therefore, supporting the OHS policy provisions. This cannot be attributable to all team managers as the experiences of the employees in chapter four makes evident.

A common goal of this line of management is creating a safe environment for every individual working in their division. A long-term goal of Douglas Booyesen is "whenever somebody retires from the company, there must be nothing actually wrong with his ears, eyes and lungs" (Colt Team Manager, 8 July 2005). Team managers are not only

responsible to the employees to ensure strict OHS standards, but to the company as well. Harry Bantom explains this further, “if we don’t do it right, it can be costly for the company and the people who work for the company” (Assembly Team Manager, 7 July 2005). Further goals are to sustain and maintain their NOSA five star certification, as well as ensuring that the environment is not damaged. The challenges faced by this line of management prevent them from achieving some of their goals.

Team managers constantly remind their employees about the rules pertaining to their work processes. China Flyn, a Bodyshop Team Manager, has to constantly remind his employees not only to take care of their own health and safety, but that of their fellow employees too. He finds that in his division, most of his employees are of a young generation posing a challenge for him. In his experience he finds that

sometimes the child within them has not disappeared yet. Hence, one has got to constantly remind them of the risks of safety and the consequences thereof (25 July 2005).

Waga Mnyanda notes that some employees harbour a “culture of not listening to authority” as he has told some employees that particular areas of the shop floor are safety boot areas, but he finds that some of his employees still don’t wear them (20 July 2005). According to managers, OHS awareness is conducted in an educational manner through pictures and posters being displayed so that employees are constantly reminded of unsafe work practices. Harry Bantom emphasises again the challenge posed by the varying educational levels of the workforce as he says, “in this company education is a problem because we have people from different walks of life and this is a big problem” (Assembly Team Manager, 7 July 2005). The difficulty in this is that management has to try and get all the workers in their departments on par to ensure that they understand the requirements of OHS and the OHS policy in the workplace. It is highlighted by Harry Bantom that employees often do not see how the OHS programmes provided by management benefit them.

A strategy of response to this challenge according to Harry Bantom, is that the company newsletter ‘The Star’ should have one column for safety. In this way management is able

to address some of the issues that employees identify with such as the importance of wearing their PPE. The consequences of employees not wearing these can also be mentioned like the long-term implications, such as the development of tuberculosis and other lung function diseases. Management affirms that they have provided their employees with adequate OHS information although there is still room for improvement. New employees are put through an induction programme before they are allowed on the shop floor. According to the OHS management policy provisions, training is not only a goal, but also a demand in order for the company to prosper. Few managers have the ability to provide continuous OHS training programmes for their employees because of limited resources. Managers cannot afford to commit significant resources to training because of the constant pressure from the corporate and the divisional level to show healthy financial results.

The first and most important obstacle faced by team management in implementing OHS training initiatives is cost, as Johan Engelbrecht says, “with training comes money” (Logistics Divisional Manager, 12 July 2005). According to Robert Ray, the Divisional Manager of Bodyshop, at the moment the company is in a huge cost saving drive resulting in training being compromised to a large degree. Niels Andersen’s response to this is,

we are a production facility. We are not a university; we are not a technichon or a high school. We are a production facility. We make money and keep people employed by making motor cars. That is our core business. Training is a very important part of it, but the problem is that the company can only afford so much training (Production Manufacturing Divisional Manager, 11 July 2005).

Stopping the plant entirely with the aim of training workers until they are all at the same level would be great, but it does not happen like that. He emphasises again that cost is the biggest challenge faced by management.

The second challenge faced by management in relation to providing OHS training according to China Flyn is the nature of their work, “the pressure of achieving the ultimate target or results of the company which is obviously an increase in production”

(Bodyshop Team Manager, 25 July 2005). It is evident that managers are struggling to make training a routine and one of their priority agenda items. When new training initiatives are launched managers become enthusiastic to develop their employees. When profits and production take a down-turn, their priorities reassert themselves and training is at the bottom of the list. Goodhope Ncapo holds the view that managers should not have any obstacles preventing them from implementing OHS training initiatives. He however agrees with China Flynn that, production issues do become prevalent resulting in training being shelved by managers. Harry Bantom affirms this challenge as he says the company as a global competitor is faced with the constraints produced by globalisation and lean manufacturing. These constraints inhibit management's enthusiasm to release employees to attend training courses. Production takes a backseat when employees are absent and others are sent to training within a lean manufacturing production system. It is evident here, that managers resist attempts to take their staff away from their normal duties.

China Flynn agrees with Harry Bantom regarding these constraints as he says that management has been provided with a schedule regarding the OHS training of employees so that appropriate arrangements can be made. Absenteeism however, infringes on people being trained. The human resources department schedules the training. Managers send their workers to the training centre and then discover that the managers from the other divisions have not sent their workers or forgot about the OHS training. A divisional manager of the bodyshop, Robert Ray, acknowledges that getting the required number of people together on the scheduled training day is a problem. Divisional managers are not effectively monitoring OHS on the shopfloor and team managers are taking advantage of this through focussing heavily on production. If the other divisions do not send their people, then the training is compromised and managers are not able to carry out the training again. Training is one of management's targets for performance management and if they do not send employees for training they suffer penalties. This is evidence of the conflictual nature of the relationship between OHS and production.

It is unanimous that management has the duty of ensuring safe working conditions, through providing the necessary OHS structures and procedures. The benefit for most team managers of having a high regard for OHS is that they have improved OHS results, they have a healthy and stable workforce and they achieve the OHS objectives of the company. This allows management and employees to take ownership of OHS, resulting in benefits for both parties. Harry Bantom agrees by saying, "I think that if a person is educated about things, the less that group of people will go wrong, because they know the pitfalls". This is relevant to OHS.

6.4 CONCLUSION

Management is experiencing shifts in their managerial actions and attitudes. Top management drives employee initiatives, encouraging the involvement of all lines of management in OHS and environmental matters. Managers are increasingly becoming aware that team work is the key to higher order business competitiveness, especially in relation to OHS. DCSA East London is ensuring that OHS and environmental matters are key factors that management and employees always need to consider in the production process, making them aspects of their managerial practices through their OHS management policy provisions. However, throughout the chapters so far employees, the trade union representatives and managers have highlighted the weaknesses in the implementation of these provisions. The fact that some of the divisional managers have not even mentioned or referred to the challenges highlighted by the employees in their divisions, emphasises the lack of an effective communication structure from the shop floor to top management and from top management to the shop floor.

Senior managers at DCSA East London are passionate about their SHE management systems and functions. In order to achieve the company's main OHS objectives, a working environment which is safe for their employees is created by top management through their systems. Production managers still struggle to prioritise OHS through effectively practicing the requirements of the OHS management policy in their divisions.

They are aware that they too are duty bound to ensure that their employees are in a healthy and safe work environment, but a small percentage still fail to do so efficiently.

Managers face various challenges in their quest to strategically incorporate OHS into their managerial practices. The challenges that are faced by management have an impact on their actions and attitudes, ultimately affecting OHS. Therefore, managers need to select the principles of their practices carefully by being aware of these challenges. A strong support base must be developed between all managerial lines involved in OHS in an attempt to overcome these challenges. Production managers have a tendency to place more emphasis on occupational safety in their workplaces as previous chapters have made evident, than they do on occupational health. Therefore, the OHS structures and systems throughout the company must be constantly evaluated by all the parties concerned, so that potential challenges are addressed immediately. The occupational safety department should be working closely with the occupational health department with the aim of tackling OHS problems in the workplace. One possible solution of the many could be the need for production managers to increase their interaction with non-production management in relation to OHS. It will become evident in the next chapter that OHS systems could benefit if all lines of production management make building constructive relationships with occupational health staff a central aspect of their occupational safety practices. The relationship between occupational health and occupational safety at DCSA East London is critically assessed in the next chapter.

7

OCCUPATIONAL HEALTH AND OCCUPATIONAL SAFETY

7.1 INTRODUCTION

Managers are now realising that it is becoming more and more apparent that helping employees to stay healthy cannot only prevent unnecessary hardships to employees, but it can also benefit the workplace. Managers are also realising that increased health and safety results in improved productivity. In this regard, the importance of health standards has become paramount (Burger, 2006: 13). According to Scott (1980: 162),

occupational health covers the field of identification and treatment of industrial disease, medical examination, and sanitary facilities at work and first-aid arrangements. Occupational safety covers accidents at work, the safety of machinery, premises and systems of work, air quality and protective clothing and equipment.

The occupational health strategies put in place by management to enhance occupational safety have a direct impact on the working conditions of the employees on the shop floor. Workplace health promotion programmes as a managerial occupational health strategy positively impact on the health, as well as the safety of employees. Such programmes compliment the safety practices of management and employees in the workplace. OHS

legislation encourages management to implement awareness programmes, provide accurate information to employees and implement support structures for them. Managers often fail to realise that by being insensitive to their employees' OHS needs, they create unhealthy workplaces for their employees. The first question that most managers ask when presented with health promotion options is the benefit they are going to receive. It is important that occupational health and safety systems meet the individual needs of management and employees. Management must bear in mind that the employees in the five divisions have different OHS needs.

Although these production divisions have their own OHS needs and requirements, the basic principles of the programme developed by the occupational health department applies to all of them. The basic principles include the environment, personal resources and health practices. The environmental factors include air, noise, the quality of the worksite equipment, the type of work performed by the employees and the medical department's relationship with production divisions and the safety department. Personal resources refer to the influence that the employees have over their health and their work, as well as the amount of social support that they receive. Health practices include behaviours such as exercise, smoking, drinking, eating and sleeping habits and the use of drugs. Such a programme must be flexible, in order to keep up with the changing demands in the company. Management and employees must work together to create a healthy workplace. The successful introduction of a workplace health promotion programme conveys a corporate value that the company cares about its employees.

The production managers, the medical department and the safety department must therefore be receptive to each others input. The safety department and the occupational health department must work together to reach their goal of promoting OHS effectively. A strategic communication system must be put in place between the occupational health department, the occupational safety department and production management. Managements' concern and their commitment to OHS is shown through their efforts.

DaimlerChrysler East London's health promotion initiatives are used to show the effectiveness of such programmes, as well as the manner in which they enhance and compliment safety structures in the workplace. The implementation of this programme is a joint management and employee effort. Management emphasises that the employees as individuals and as a collective body through the union, are important aspects to include if the programme is going to produce the best results.

This chapter outlines the value of an occupational health division in assisting the occupational safety department in providing a healthy and safe workplace for management and employees. It is apparent that the activities of the occupational health and safety departments have become incoherent. Through more structured and strategic efforts to work together by the two departments, OHS systems in general in the company will be enhanced.

7.2 THE PROMOTION OF OCCUPATIONAL HEALTH

Dr Clifford Panter's strategy to health promotion is to focus on some of the critical health issues in the business. Through focussing on these the OHS structures and systems in the company are enhanced. The critical health issues that have been identified include HIV/AIDS, chronic disorders of life style, substance abuse and absenteeism from minor ailments impacting on the business. The occupational health department is in the early stages of implementing a multiple strategic approach to health promotion.

7.2.1 Wellness Days

One of these strategies is a wellness day, run twice a year. This is in the form of an exhibition promoting occupational health and awareness. Employees view and learn how to prevent chronic disorders, what the benefits of exercise are and or they have a physical assessment done. Employees need the permission of their production managers to attend these wellness days during production time. Some employees are only able to do so

during their lunch time or after their shifts have ended at the insistence of production managers.

7.2.2 Company Wellness Intranet

The second strategy to health promotion is the company wellness intranet. The intranet consists of different components. One of these components is medical aid information, educating employees about the rules and regulations, current benefit packages and arranged health care interventions. There is also information relating to occupational health, as well as frequently asked questions and answers relating to occupational health that employees are able to download. A second component is the health insight website. DCSA East London contracts from Johnnic and has access to their health-insight website. This is a medical encyclopaedia from which articles can be downloaded on medical conditions. Occupational health information can also be collected from the wellness centre by managers for their employees. There is also a quarterly newsletter with occupational health information for managers and employees called 'DaimlerChrysler Wellness Services'. The third component is the HIV/AIDS website, which features a monthly newsletter.

7.2.3 HIV/AIDS Workplace Health Promotion Programme

The third strategy used by management is the HIV/AIDS workplace health promotion programme. This programme is well entrenched in the business. It includes a range of training interventions, consisting of an induction training programme for employees, peer educators, shop stewards, human resource practitioners, line managers, apprentices and learner-ship students. COSATU'S opinion is that a fund should be established in the company, jointly managed by the union and management for the purpose of HIV/AIDS education and training. The trade union at DCSA East London, NUMSA, being an affiliate of COSATU has successfully filtered down the provisions of this onto the shop floor. The objectives of education, counselling and training are

- To create awareness of the HIV/AIDS epidemic.
- To remove the stigma against those infected.
- To promote safe sex through condom distribution.
- To equip union leadership with counselling skills.
- To provide care and support for people with HIV/AIDS (COSATU, 2004: 2).

The commitment of DCSA East London managers' is evident in their OHS policy provisions, but it has been taken further in the form of a workplace health promotion programme. It is evident that like occupational safety, occupational health is emphasised with the intention of improving productivity levels and increasing profits and employee morale. The HIV/AIDS programme is developed through consultation with all levels of management and employees in the plant.

In COSATU'S view an HIV/AIDS policy should cover aspects including:

- Access to jobs for applicants with HIV/AIDS.
- Job security for workers with HIV/AIDS.
- Whether workers and applicants should be tested for HIV/AIDS.
- The right of the worker to disclose his or her status.
- Protection for workers against discrimination.
- Benefits for workers who are HIV/AIDS positive.
- Access to training, promotion and benefits for HIV/AIDS positive workers.
- Grievance procedures concerning employees and HIV/AIDS.
- Reduction of risks in the workplace.
- First-aid and precautionary measures against infection.
- Education and awareness programmes.
- Other prevention programmes.
- Wellness management.

These principles have a direct impact on DCSA through NUMSA'S affiliation to COSATU. NUMSA is pushing these aspects in the company and they have been successfully implemented in the plant by management. This affirms the argument made in chapter five that the union is more confident in their HIV/AIDS initiatives than their OHS initiatives. This is affirmed by Micheal Dibela saying "with HIV/AIDS issues I feel at home" (Shop steward, 27 July 2005). Management is required to create a safe working environment in line with the provisions of OHSA. This means that proper equipment must be provided to protect workers against infection and they must be trained in the use of precautions. The focus is on prevention rather than cure, as management wants employees to know their status. If employees are HIV/AIDS positive they are offered medication and taught to live a good and healthy life.

COSATU states that management has the responsibility to encourage all their employees to get tested for HIV. It is also the employer's responsibility to pay for the counselling and testing of their employees (COSATU, 2004: 5). Management has a second responsibility to ensure that all employees who do get tested receive counselling by a trained counsellor, preferably a shop steward, before and after the test. It is essential that managers practice confidentiality regarding their employees' tests. Workers, who are open with management about living with HIV, must be encouraged to conduct and participate in education, prevention and awareness programmes. Management must promote the development of support groups for workers living with HIV and ensure that workers who are open about their HIV status are not unfairly discriminated against or stigmatised (COSATU, 2004: 5). It will become evident throughout this chapter that management is practicing their responsibility in this regard and the trade union has successfully implemented national policy provisions at company level regarding HIV/AIDS.

In a recent article in the Daily Dispatch (11 April, 2005: 3) titled 'HIV + workers at DCSA don't suffer in silence' the company makes it known that "nearly ten percent of the employees at the East London plant are infected with HIV/AIDS". The company employs three thousand employees of which two hundred and eighty-eight tested positive

in the past year. During 1999, the plant lost fifteen employees due to AIDS related illnesses. According to Dr Clifford Panter, the Group Medical Advisor, the HIV/AIDS company workplace programme that was implemented in 2002 is the reason for the reduction in the amount of employee deaths in 2004. Dr Clifford Panter explains that “our mortality rate is very low mainly because of the programme in place” (2005: 3). DCSA East London management promotes regular voluntary counselling and testing for HIV among employees. Two campaigns have been run over the last three years to promote counselling and testing. There was sixty percent participation in the first campaign and it increased to eighty percent in the second. According to the company’s medical-aid data and company clinic data, ninety-two percent of employees have had at least one HIV/AIDS test in the last five years while forty-five percent test on a regular basis once a year.

More than six hundred rand is spent on each employee per year on prevention, care and support initiatives. An average of eleven thousand rand per year is spent on each infected employee or employee family member on treatment costs, including antiretroviral drugs. DCSA East London’s workplace health programme is recognised nationally and internationally. It involves education, awareness, advocacy and integrated health care, as well as risk management and community involvement. The fact that management has genuine relationships with employees based on trust is evident in workers not being afraid of confidentiality regarding their HIV/AIDS status, as management has proved that they can be trusted. Rodney Banton noted that,

DCSA is a big company. The union has joined hands with big bosses and we are going to take this company places, regardless of the number of people infected with the disease (Daily Dispatch, 2005: 3).

COSATU has urged NUMSA and their other affiliates to negotiate workplace policies with management regarding HIV/AIDS. The union representatives feel that there is a need to improve and strengthen education on these topics in the workplace. The union leadership feels that consensus must be reached between itself and management on how to deal with HIV/AIDS in the workplace. The union representatives feel that the shop

stewards should be educated so that they are equipped with counselling skills. Members of the health and safety committees need to receive education to ensure that they can assess the working conditions for their members with HIV/AIDS. The union feels that education should be included in the workplace training plan and it should be funded by the employer (COSATU, 2002: 17). Management and the union should jointly design the programme and designate the trainers. HIV/AIDS education should provide accurate information that is easily understandable by all employees. (COSATU, 2002: 13). Management at DCSA East London have once again aligned their policies with that of NUMSA in relation to HIV/AIDS.

This is evident through top management believing that HIV/AIDS is a fundamental obstacle to sustainable development in South Africa. In the words of Dr Clifford Panter “as DaimlerChrysler, as an original equipment manufacturer doing manufacturing in sub-Saharan Africa and South Africa, we are increasingly relying on the localisation of services and suppliers” (Group Medical Advisor, 22 July 2005). Although intellectual capital resides in Europe, the company is vulnerable to problems at a supplier level. Therefore, if a company wants to continue manufacturing here it must ensure the sustainability of the economy. For the company this is the economic and the political reason for tackling HIV/AIDS. HIV/AIDS also impacts on the business by raising the costs of medical aid, increasing absenteeism and through loosing investments made on skills development.

The second reason for making HIV/AIDS a central aspect of their health promotion programme is historical. Throughout the 1990s service providers in the company kept saying and thinking that HIV/AIDS was impacting on employees. In 2000 the company therefore, decided to put in place a project measuring the impact of HIV/AIDS on the business. According to Dr Panter however,

because of the nature of the business model, it is not actually having significant productivity implications. The big impact is on the cost of health care and the cost of distributability (Group Medical Advisor, 22 July 2005).

Even though AIDS deaths have decreased, temporary disability associated with HIV is high. HIV/AIDS is one of the company's most significant obstacles to sustainable development and the company is committed to showing that it is doing its share in tackling HIV/AIDS, contributing positively to OHS structures.

7.2.4 Occupational Health Nurses Providing Occupational Health Services

The fourth strategy used by management to health promotion is through ensuring that the occupational health nurses fulfil their obligation to perform periodic medical examinations and observations of employees and management who face workplace health risks. Their aim is to conduct full periodic medical examinations on every employee under the age of forty years, every two to three years. Employees over the age of forty are examined every one to two years. This allows the medical department to interact with the employees on the shop floor. The objective of this is to perform a general health assessment status together with a periodic examination. For example if an employee is a welder they would come once annually for a lung function test, visual acuity testing and a hearing test.

The primary purpose of occupational health nurses is to monitor the exposure of production managers and employees on the shop floor to the various chemicals and fumes that are encountered by them. It is important that management is aware of the chemicals that come through into the plant. Sister Max Brady makes apparent that

at one stage we would have chemicals coming in and we did not even know. It was a big problem; we did not know what was in the plant. So how do you test your people or monitor them when you don't know what's coming in (Company Nursing Sister, 21 July 2005).

Previously there was no control regarding the chemicals and substances that entered the plant. Presently, nothing is allowed to come in that has not gone through the lab for testing or that has not been approved. It is therefore, only once the substance is approved by the doctor, the laboratory, the environmental specialist, the safety officer and

purchasing is it allowed to come into the plant. This group of people sign the chemicals off so that management knows exactly what and where it is.

The occupational health nurses monitor the danger posed by the machinery from an ergonomic perspective. They have the authority to make suggestions on how to improve the machinery. This is one of the primary objectives of the nurses. They have a close working relationship with the biokineticist, Hannes Venter. He holds workshops with the aim of educating employees and management about occupational health issues such as back injuries and maintenance, as it is one of the most common complaints together with cholesterol, diabetes and hypertension. The nurses conduct worksite inspections to assist them in assessing the needs of the employees. If employees suffer from backache the nurses find out whether it is work-related, which in most cases it is. They then make recommendations to the team manager based on their assessment of the employee together with the recommendations made by Hannes Venter. These OHS strategies are enforcing the need that occupational health be completely integrated into all manufacturing activities.

The function of the occupational health nurses is evolving, as they now work closely with the safety department. Their function is directly linked to that of the safety officer. Their role must therefore, be strategically placed within the OHS practices of the company. Effective communication between the occupational health nurses and the safety department is not practiced effectively or carried out efficiently, as Joseph Sihlahla makes apparent,

because we have not yet been in that stage of planning together. If accidents happen then the safety officer goes and makes an investigation (Medical Department, 24 July 2005).

This results in negative outcomes which are made evident later in the discussion through the challenges faced by the medical department. The nurses also have a close working relationship with production managers, as they assist them in strategically placing employees in the most appropriate production division and department.

The nurses provide job specifications and personnel seek advice from them if they are not sure whether employees are able to cope in a specific production division. If the nurses know where the employee is going to be placed in the production environment, they inform management of whether or not the employee is suitable for the area. The employees' classifications are put into the system so that if team managers want to transfer an employee from one area to the next, they have the ability to see what the employee's medical classification is.

Every employee that enters the manufacturing plant has a baseline medical examination performed on them. The employee is then categorised after which he is placed in the most suitable production division by personnel. This practice enhances the OHS of the employees. Sister Max Brady explains further,

essentially if they are asthmatic, we do lung-functions, we do audiograms, and we check their eyesight. We do a head-to-toe examination and we make a finding and we then classify them according to that and place them in a production area (Company Nursing Sister, 21 July 2005).

Employees working in high risk areas have periodic examinations performed on them regularly. It is therefore, important for the nurses to know the workmen's compensation diseases although they are not easily identifiable. One example is lead exposure. Occupational health nurses must do lead testing. This is done once a year in the motor industry because the lead exposure is so low. If the results are high, testing is done on a monthly basis. However, if tests are conducted again and the results are high again the employee is removed from the lead environment. Noise-induced hearing loss is a second example portraying the difficulty in identifying the causes of occupational health diseases. Sister Max Brady highlights this difficulty through the following example,

employees go to town in a taxi, or have a taxi parked next to them with loud music and that is noise induced hearing loss. They work with earphones listening to music and that is noise induced hearing loss. At work employees work in a noise-induced area where they have to wear protection, but some do not do that resulting in noise-induced hearing loss (Company Nursing Sister, 21 July 2005).

A difficulty experienced by the nurses is distinguishing between the different areas and pin-pointing the one that actually caused the hearing loss. When the noise is over 85 decibels production managers put up signs of the correct PPE that must be worn. In certain cases employees are moved to a less noisy area of the shop floor, due to the effects of noise-induced hearing loss and it must be reported to the Compensation Commission. In the view of Sister Max Brady “no employee should really get noise-induced hearing loss if they do wear their protection and follow the rules” (Company Nursing Sister, 21 July 2005).

It is for this reason that the results of the employees’ periodic examinations and baseline examinations are kept until they leave the company. Any hearing loss that is suffered while the employee is in the company is that company’s responsibility. When an employee leaves the company, a medical examination is done on them. In the event of an employee leaving to another company, their results are forwarded to the new company so that its management accepts the employee with that level of noise-induced hearing loss.

The nurses have a programme guiding them when they perform medicals. They start with the high risk areas and work their way down to the low risk areas. A report based on their findings is then provided to the team manager. This ensures that if audits are conducted by the safety department, the team manager knows that all his employees have been examined. The team manager according to Sister Max Brady, has a duty to inform his employees that,

they are being protected and they are safe. Employees have a right to know what they are working with, what the dangers are, how they need to protect themselves and how the company needs to protect them (Company Nursing Sister, 21 July 2005).

It is therefore important that nurses and management actually know what their employees are working with so that they would be able to assist them in cases of trauma or when first-aid is required.

7.2.5 Occupational Health Nurses Providing Primary Health Care

The fifth strategy used by management is the occupational health nurses also providing primary health care. Employees come into the medical department with ailments such as coughs, colds and chest pains. If the employees are referred to a specialist, a report is also sent to their private medical practitioners so that they are kept informed regarding the employees health condition. The occupational health nurses have built up professional relationships with psychiatrists, psychologists, social workers, as well as the private doctors of the employees. Employees with drug and alcohol problems are referred out if they might require long-term treatment. According to Sister Max Brady, occupational health nurses must have an aim of encouraging the employees to take responsibility with them regarding their occupational health. Joseph Sihlahala holds the opinion that the efforts of the medical department “can work, but they need the team approach from the safety department and the production managers” (Medical Department, 24 July 2005). Through providing employees with regular examinations and carrying out regular workplace inspections, the medical department has the ability to highlight the occupational health concerns to management that they are picking up on that have the potential to be negative to production in the plant.

The occupational health nurses interface between the team managers and the employees. As Sister Max Brady confirms,

If workers have a problem, I will even go to the very top for you. I will go with you to a shop steward. So we actually inter-lock between the production managers and the employees (Company Nursing Sister, 21 July 2005).

Sister Max Brady feels that the occupational health nurses have a big role to play in health and safety, although at times it seems as though production managers do not realise this, as they place more emphasis on safety, than they do health. Production managers have a narrow view of the role of the occupational health nurses as being a service, separate from their role of production and profits. Managers expect the nurses to examine their employees timely when they are sent to the medical department because production time is being lost. Production managers however, do not realise that the

nurses also have to perform managerial and administrative functions impacting on the effectiveness of the services that they offer.

The occupational health nurses offer occupational health care and primary health care services. Although occupational health services is their core performance objective, it is not being attained or maintained, as most of their time is taken up with primary health care because that is the demand that they have from employees. This has the ability to negatively impact on the safety of the employees. A contributing factor is that nurses are faced with large amounts of administrative work when they are on duty. They perform a managerial function increasing their workload, as they have to attend plant meetings as well as OHS meetings. Order forms need to be filled in when the need arises for new medication and equipment.

The occupational health department's services must be evaluated. The department has the infrastructures to enhance the occupational safety aspect. A more strategic communication strategy needs to be initiated and implemented between the occupational health staff and the production managers. This can be done through promoting OHS specifically in the team meetings and the divisional meetings. The medical department however, has not audited compliance by production managers for more than a year. Production managers' are instructed to run weekly team meetings, but as Dr Clifford Panter admits that "we have gotten into the situation where we no longer routinely monitor compliance" (Group Medical Advisor, 22 July 2005). One possible reason for this is that management takes for granted that if workers do not raise any OHS concerns or grievances, they are happy with the OHS standard in their workplaces. In the new communication strategy being developed, a central principle is the intention of management to resume some level of compliance management and monitoring regarding the production managers in relation to OHS specifically.

7.3 REVIEWING THE SERVICES OF THE OCCUPATIONAL HEALTH DEPARTMENT

The OHS policy is reviewed annually in November. Management reviews what is actually being done in relation to OHS according to the operational plan and based on their findings they re-plan for the next year. This is done because the OHS policy requires this operational planning methodology. A monitoring system was introduced in November 2004 for the medical surveillance plan through the action centre process. Here, management compares the amount of medicals that have been done according to those that have been planned. Dr Clifford Panter is

not convinced that we have planned enough medicals. I think that the nurses are trying to get out of it. I think they should do more medicals on the shop floor (Group Medical Advisor, 22 July 2005).

This however is a matter of some debate as section 7.4 makes evident. The medical surveillance plan is carefully monitored through assessing aspects such as looking at injuries on duty, medical emergencies and the activity of the medical department. Through this process the activities of the wellness centre are carefully monitored. The primary goal of these systems is to increase the safety of the employees through medical examinations, physical work-outs, physical rehabilitations and promoting good and healthy lifestyles. Their slogan according to Hannes Venter is to “build the people that build the car” (Wellness Specialist, 26 July 2005).

Dr Clifford Panter makes it known that “health promotion activity outside of HIV/AIDS programmes are not all that well monitored” (Group Medical Advisor, 22 July 2005). Much emphasis is placed on monitoring aspects of the HIV/AIDS programme such as impact evaluation, monitoring treatment outcomes of AIDS, the percentage of sexually transmitted infections and tuberculosis, disability outcomes, death outcomes and productivity impacts. Management’s objective is to slowly try and introduce monitoring in all their health promoting interventions. An example is the following; the medical department launched a diabetes management programme on their medical-aid scheme. The programme allows the medical department to select a doctor who has been trained by the centre for diabetes in endocrinology in Johannesburg. The medical aid scheme pays

the doctor upfront the capitation fee, to keep the employee out of the hospital, to keep the employee's blood sugar at the right level and to keep the employee well. If the employee ends up in hospital, the doctor pays for the expenses. The business aim is to generalise this level of monitoring to other chronic disorders. In the middle of every year, the medical department attempts to run a campaign on chronic diseases of life-style, although their attempts have never materialised because

here we have not done it before. We have neglected it (Dr Clifford Panter, Group Medical Advisor, 22 July 2005).

Impact evaluation in health care and health promotion is difficult because a lot of what management is trying to change is the behaviour of the employees. Added to this is that most times what they want to measure is reported behaviour. It is again highlighted by Dr Clifford Panter that,

I think as a company we are staying in touch with health care monitoring, especially in relation to HIV/AIDS. We want to generalise from our learning's here into other areas (Group Medical Advisor, 22 July 2005).

The other operational activities such as safety have no such well established monitoring. The safety department receives feedback from the SHE management system, the safety representatives, SHE committees and the company wide risk management committee regarding the employees' views and concerns on the shop floor. This could possibly be one of the reasons for the lack of effective practices and systems in some divisions mentioned in chapter four. Dr Clifford Panter expresses his opinion, "I think that these forums are a good enough framework for feedback" (Group Medical Advisor, 22 July 2005). It should be recognised that these structures have not been running efficiently in the divisions, resulting in the value of their feedback being questionable as chapter four makes apparent.

There is also an employee satisfaction index of which eight questions are health related. The index is run twice a year and it receives 65 percent participation. A second area for

management to get feedback is through the normal communication structure which is being revamped. The third area from where management can get feedback is through following up on problems before they are sorted out. A suggestion box is provided for employees to place their views and concerns in for management. The weaknesses of these have been outlined in chapters three and four. However, the best way to get feedback is to get some routine monitoring in place through the implementation of systems. Dr Clifford Panter suggests that managers must learn to take critical feedback seriously and reply to it. A culture must be created in the company in which feedback is respected. Even with the best systems in place there are no guarantees of their success, as Dr Clifford Panter puts it,

well you have no assurance, but I think that we have commitment to service in health and safety. As you know there are two competing customers often: there are the employees whose immediate interests might not coincide with the business interests. And those of us, who are health and safety practitioners in the business, have to service the needs of both customers which are not always coincident (Group Medical Advisor, 22 July 2005).

It is emphasised by Sister Max Brady that the systems in the motor industry are constantly changing. Every year there are changes in the company resulting in the need for a new evaluation and monitoring system. It is for this reason that the wellness programme managed by Hannes Venter is flexible to change. The basic principles of the programme such as occupational health, safety and environmental aspects do not change, but the execution of the programme changes due to the demands of the employees. Sister Max Brady thinks that

the motor industry is one of the most challenging industries that you can get into. There is no way that you can stop learning (Company Nursing Sister, 21 July 2005).

The occupational health nurses belong to the occupational health nurses group which encourages them to attend courses to update their knowledge. The nurses also learn from legislation because they are governed by it. Their systems are monitored and evaluated against the evolving legislative requirements. Sister Max Brady emphasises that

you can't just know your job. If the production manager's job is going to interact with my job, I want to know what he does in his job (Company Nursing Sister, 21 July 2005).

It is important that the production managers and the occupational health nurses are familiar with each others roles, responsibilities and systems relating to OHS, as they have the ability to enhance the monitoring and evaluation of each others systems. It is important that the production managers and the occupational health staff together with those responsible for safety, find solutions to the weaknesses in their OHS systems together. It is important that all these parties are efficient so that together they are effective. It is therefore, important to communicate constantly, to speak about the inefficiency and the challenges, to find out where the problem actually lies. The aim of this is to try and iron out the problems to make the system work better.

A second important aspect requiring attention is that the occupational health programme put in place in one division might not work as effectively in another division. Occupational health managers therefore, need to inform the production management about their system and discuss it. Most times involving the necessary parties in such discussions does not happen. When one department implements a system, they tend to tailor it to suite their needs only. As sister Max Brady says "managers don't understand the importance of another person in that so I think that's where most of the problems come from here" (Company Nursing Sister, 21 July 2005).

7.4 CHALLENGES ENCOUNTERED BY THE MEDICAL DEPARTMENT

The principle challenge faced by the wellness centre is convincing the middle of the business, middle management that it is a good business case to promote occupational health, as well as occupational health management programmes. At the executive managerial level and the senior managerial level there is no need to convince, but middle management is under pressure to maintain production and marketing targets. Health

promotion activities are often seen by production managers as being an extra burden, as chapters three, four and five make evident. The management of the occupational health department thought “we would put out an intensive effort for a couple of years and then health promotion would be built into the business, but actually keeping health promotion and health management as part of the business requires an on-going facility” (Dr Clifford Panter, Group Medical Advisor, 22 July 2005). This remains the biggest challenge for the wellness centre.

In terms of attending to the employees’ needs, the medical department falls short of giving employees the treatment that they should be given. The occupational health nurses must be focussed on prevention, but they make evident that “we are not regular; we are not at the standard where we should be” (Joseph Sihlahla, Medical Department, 24 July 2005). In the view of Dr Clifford Panter an area in the East London production environment that needs more attention is the occupational health staff. They have over the last year and a half retreated into their health centre and are not active enough on the shop floor. Occupational health like occupational safety is a preventative service, but at the moment it is reactive. They are only fulfilling their actual occupational health duty twenty percent. Evidence to support this is “we are trained in occupational health, but we just give primary health care not occupational health” (Joseph Sihlahla, Medical Department, 24 July 2005). Dr Panter would like

to see a return on that where the nurse practitioners do a monthly walk-about, where they know who their first-aiders are, they know who their HIV/AIDS peer educators are and they know who the SHE representatives are. The nurses should be interacting with these people and attending the SHE committee meetings religiously. They should be giving good occupational health feedback to the line managers (Group Medical Advisor, 22 July 2005).

A concern is that because of the pressures of clinical care and because of the reduction in staff numbers, the nursing team are placing all their focus on a clinical role rather than an occupational health practitioner role.

The medical department is small, but they have a lot of functions, as they supply the whole plant with services. The nurses have developed a schedule for the plant, but they are unable to see it through because “the plant has always said production comes first” (Max Brady, Company Nursing Sister, 21 July 2005). This point again has been stressed in chapters three, four, five and six. Production managers make unreasonable demands at times from the occupational health nurses, but refuse to make provision in their production areas for the nurses’ plans. The response of a small percentage of production managers to these programmes is, “uhg we don’t wish for things like that” (Max Brady, Company Nursing Sister, 24 July 2005), but they expect special provision to be made for them. Production managers often forget that there are four other divisions that the nurses have to attend to despite the fact that they are short staffed and they still have to take care of primary health. Production managers expect the occupational health nurses to do twenty medicals on a random day because they want it that day. Sister Max Brady stresses this point as she repeats,

it has always been like that. Production is number one. When the medical department calls employees in, production managers do not understand and they say that their employees are too busy, but they expect miracles from us (Company Nursing Sister, 24 July 2005).

In essence, the challenge faced by the medical department is getting management to understand firstly, what their role actually is regarding OHS and secondly, that the medical department has the potential to positively influence the safety of the employees on the shop floor. Management and employees view the medical department as being an asset to employees rather than a necessity. They need to be educated and made aware that the medical department is part and parcel of the OHS structures through ensuring compliance in reducing incidents and hazards on the shop floor. The reason for the occupational health department not being effectively involved in the safety aspect is because production and safety management does not see that as their role.

Communication challenges are preventing collaboration between the two parties, as there is minimal communication taking place between the occupational health and the occupational safety departments. Instead of merely providing the safety department with

the number of injuries, the occupational health department can work together with the safety department in investigating the injuries. It is made apparent by the occupational health nurses that, “the safety guys don’t even communicate to us the injury records that are there” (Joseph Sihlahla, Medical Department, 24 July 2005). The medical department however, should be conducting worksite inspections on a monthly basis. If they actually had the ability to carry these out, they could assist the safety department.

Strategies must be developed to assist the nursing staff in performing workplace inspections according to their schedule, allowing them to carry out their service on a corrective basis continuously. A suggestion made by the medical department is contracting out the primary health care function of the occupational health nurses, allowing them to focus on occupational health. The second suggestion is that the occupational health nurses work two shifts including working on Saturdays so that they will have the ability to get back onto the shop floor. This will assist them in making recommendations together with the safety department regarding the health and safety of the employees. Management needs to be made aware of the role and function of the occupational health department. This is confirmed by Hannes Venter as he mentions, “I think that this must be driven again properly” (Wellness Specialist, 26 July 2005).

Dr Clifford Panter makes apparent that, “for us at DaimlerChrysler the cost of labour including the cost of all these programmes is a minuscule part of the input process” (Group Medical Advisor, 22 July 2005). This is the reason why the business case for promoting OHS is pushed hard and is supported by the Board Member for Human Resources, Mr Johann Evertse. Top management at DCSA East London hold the view that promoting OHS is the right thing to do, as it does not cost the company a lot of money. Many employees hold the view that management receives an immediate output on their input from their investment in the occupational health of their employees. Dr Clifford Panter stresses that, “I am not prepared to say that there is a massive investment in return for health” (Group Medical Advisor, 22 July 2005). According to him investment on return regarding occupational health knowledge is long-term. The company has put in a long-term effort and management is convinced that they will get a

long-term benefit. Often in health promotion there is no saving or profit to be made. Rather management feels that if they allocate sufficient resources to the promotion of OHS they will incur less of a financial impact at a later stage than if they did not spend it. This is evidence of the commitment of the company in general to OHS.

The commitment of the occupational health nurses is evident, although some of the challenges that they face inhibit their commitment. As Sister Max Brady notes,

I think that we are trying. I am sure that we are falling short in some way, but we have got to be committed to ensure that we do it right (Company Nursing Sister, 21 July 2005).

One of the aims of the company is looking after their employees. Sister Max Brady emphasises the point that what management has set up to look after the health and safety of its employees is supported by her one hundred percent. Individual managers are however required to effectively implement and monitor the OHS structures. Therefore, the effectiveness of the systems depends on the people doing their job responsibly, as the company does have all the resources to ensure that they provide a good service.

7.5 CONCLUSION

The occupational health department has the ability to enhance the occupational safety of the employees as it possesses the resources to play an instrumental role in health and safety. Hannes Venter emphasises that “it already enhances it in the fact that instead of just treating symptoms in the clinic we look at what caused it” (Wellness Specialist, 26 July 2005). This is where the biggest impact is. Therefore, the department is looking at the core problems resulting in employees experiencing unhealthy and unsafe working conditions, making the department’s services proactive. The occupational health programme according to Hannes Venter demonstrates the commitment of management towards health and safety. Corporate wellness must be an essential part of a company’s structure because of the impact that it has on the company. It is important that management be proactive about their employees’ health.

8

WORKPLACE INCIDENTS

8.1 INTRODUCTION

According to the ILO, safety at work is generally measured by the number of incidents occurring within a workplace. This brief chapter aims to focus on work-related incidents according to the DCSA definition of incidents. It examines the incidences for the five year period, 1 January 2001 to 31 August 2006. Then an attempt is made to evaluate the targets set by DCSA in terms of reducing work-related incidents. Changes in the trend of safety incidents are also highlighted.

8.2 DEFINING WORKPLACE INCIDENTS

The ILO (cited in Burger, 2006: 139) defines a workplace incident as “an incident to an employee which arises out of and in the course of his or her employment and includes occupational diseases and exposures”. At DCSA a distinction is made between different kinds of incidents. These are minor injuries and disabling injuries. An attempt will be made to assess total incidences (all injuries on duty) as well as lost time incidences for the outlined period.

According to Stranks (cited in Burger, 2006: 16) accidents can be described as “an undesired event, which results in physical harm and or damage to property”. Accidents do not simply happen; they are the consequence of a series of events leading to this

undesired event. Therefore, in the opinion of Stranks, it can be said to be an unexpected occurrence that interrupts work (cited in Burger, 2006: 16). Stranks (cited in Burger, 2006 16) identifies the characteristics of accidents which include the following aspects:

- As far as the victim is concerned, accidents are unforeseeable.
- Accidents are unplanned.
- They are unintended and unexpected

All accidents are therefore, said to be costly. Management is unable to compensate families for the loss of loved ones or for the emotional and psychological injuries suffered by workers incapacitated by a serious accident. Accidents involving skilled or critical staff will jeopardise operations and force the employer to invest more resources in training or in finding a quick replacement. The worst case scenario is in major accidents when factories may be forced to close down, resulting in large numbers of people losing their jobs (Burger, 2006: 16).

According to Vernon Moonieya (Safety Specialist, 20 September 2006) Injury On Duty (IOD), refers to any injury or disease originating from the work environment. This refers to the total incidences that occur within the work environment. They include first-aid incidents, which are also known as minor incidents and lost time incidences. Minor incidences only require first-aid or over-the-counter medication. Hence, no compensation claim is issued. Medical incidents refer to those in annexure 1 of OHSA. They require more than only first-aid or over-the-counter medication. The treatment that they require is in the form of further medical treatment rendered by a doctor, a hospital and or a compensation claim for occupational injuries and diseases is submitted. Lost time incidences include incidences known as lost work day cases, restricted workday cases or disabling incidents. These incidences are said to be disabling because when an employee leaves work due to an injury, they are disabled from carrying out their normal duties. Such injuries arise out of and in the course of duty, resulting in any occupational illness, injury or disease and give rise to any related temporary or permanent disablement as determined by a medical practitioner.

When an employee sustains an injury, their immediate supervisor is informed and the injured employee is sent to the medical department. The incident is then investigated and the ultimate responsibility for the incident rests on the site leader and the plant engineer. Included in the investigation is the assessment of the efficacy of the controls and other preventative measures that are in place to ensure that the specific incident never happens again. This ensures that the actual cause of the incident is investigated (Vernon Moonieya, Safety Specialist, 20 September 2006).

When an incident occurs, it is logged and controlled in SHE meetings that take place in all the divisions. If the issue is unable to be resolved in the division, it is escalated to the next level. Here, an attempt is made to establish the root cause of the incident as well as the action that needs to be taken to ensure that the incident does not happen again. The incident must also, depending on the severity, be investigated and reported to the Department of Labour. Vernon Moonieya feels that “the monitoring of this is good because of our meeting and action management system (MAMS)” (Safety Specialist, 20 September 2006). Regular meetings are held between safety managers and production managers in order to evaluate the injuries that have been occurring. An action is immediately put in place and the particular manager concerned has a limited time period in which to carry out the action, preventing the same incident from occurring. The action that managers take after an incident has occurred is routinely monitored.

8.3 ANALYSING THE INCIDENT STATISTICS AT DAIMLERCHRYSLER SOUTH AFRICA.

Many factors impact on the efficacy of OHS management. These are discussed throughout the dissertation. Managements' efficacy is ultimately measured by analysing incident statistics. In doing so, an attempt is made to evaluate the efficacy with which they implement the provisions of the OHS management policy. The information for the five year period 1 January 2001 to 31 July 2006 is adequate to analyse the trend of incident occurrences and to reach an informed conclusion. Tables and graphs will be used

to depict the trend relating to the incidences that have been analysed. The number of incidents that occurred in each month will be shown, as well as the total number of incidents that occurred annually. The aim is to determine whether there was an increase or a decrease in the amount of incidents from year to year and to find the possible reasons for the increase or decrease.

8.3.1 The Organisational Causes of Accidents

Takala (cited in Burger, 2006: 16) identifies the major contributory, although identifiable, factors that impact on the prevalence of occupational accidents. These factors include:

- The existence of a poor safety culture.
- The lack of an OHS policy in the workplace and if one exists, there is an inadequate implementation of its provisions.
- There is a lack of participation and collaboration between management and employees in drafting and implementing its provisions.
- There is a lack of an occupational health and safety management system.
- Poor occupational health and safety services exist in the company.
- There is a lack of knowledge regarding solutions to OHS in the company by management.
- A lack of research and proper statistics for priority setting is also a contributing factor.
- A lack of an effective training and education system at all levels in relation to OHS.

The view of Smallwood (2000: 86) is that it is generally accepted that accidents on site can be attributed to organisational failures. It is thus beneficial to companies to prevent accidents as they could be very costly. These include factors such as a lack of managerial control, absolution of managerial responsibility, cost cutting and time saving. Such factors are identified as the primary factors that lead to unsafe work practices and fatal accidents. According to Griffiths (cited in Burger, 2006: 17) a

large percentage of accidents occur because of a lack of awareness, knowledge, supervision and regulation in relation to OHS. Unsafe work methods, faulty equipment and procedures and poor safety management have also been identified as a primary cause of accidents.

Some of these factors are characteristic of divisions in the company. This has been made evident by the actions of both management and employees in chapters four, six and seven. This could be one of the many possible reasons why accidents are still occurring, despite the comprehensive OHS systems that management has put in place.

8.3.2 Injury on Duty cases (total incidents at DCSA)

Current IOD cases are calculated by adding current minor injuries and current disabling injuries. The table below depicts the figures for current IOD cases and progressive IOD cases. The actual figures for the twelve months of the year are tabled for the six year period. The total figures for the year are then used in the graph to depict the total IOD cases for the year. Progressive figures are figures that are carried over from the previous month to the next, while moving annual total figures are carried over from the end of the previous year to the beginning of the following year.

Table 8.1: A Monthly Breakdown of the Current Injuries on Duty

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	26	40	51	53	41	40	41	11	42	30	46	28
2002	35	48	50	62	46	47	27	33	36	29	38	20
2003	29	34	28	20	26	16	19	17	13	13	13	13
2004	14	10	9	6	22	24	24	23	25	17	27	13
2005	0	0	0	1	0	0	0	0	0	1	0	1
2006	3	0	0	1	2	0	0	-	-	-	-	-

(DaimlerChrysler South Africa (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

The highest recorded injury on duty cases are between 2001 and 2004. There is a vast reduction in the amount of injuries that took place between 2005 and 2006. A large number of the injuries take place between January and June. This is evident between 2001 and 2003. There is an evident decrease in the amount of injuries that take place between July and December in 2001, 2002 and 2003. It can be said that the company had a successful year in relation to the number of injuries in 2005 as only three injuries were recorded.

Table 8.2: A Monthly Breakdown of Progressive injury on duty cases

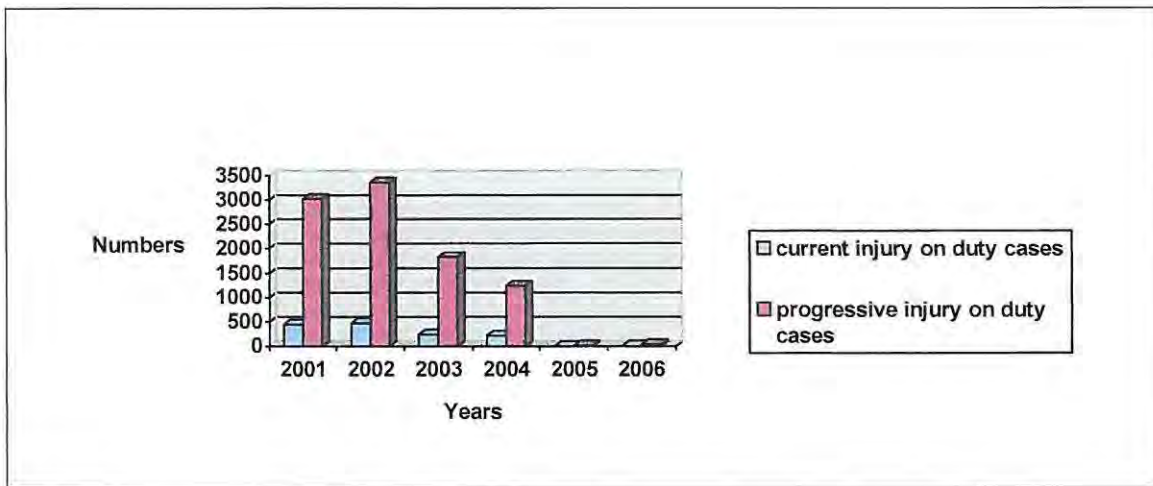
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	26	66	117	170	211	251	292	303	345	375	421	449
2002	35	83	133	195	241	288	315	348	384	413	451	471
2003	29	63	91	111	137	153	172	189	202	215	228	241
2004	14	24	33	39	61	85	109	132	157	174	201	214
2005	0	0	0	1	1	1	1	1	1	2	1	3
2006	3	3	3	4	6	6	6	-	-	-	-	-

(DaimlerChrysler South Africa (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

Progressive injury on duty cases are calculated by adding progressive minor injuries and progressive disabling injuries. The three year period from 2001 up until and including 2004 shows the highest IOD rates. From the above calculations, it can be said that the previous OHS systems were not as efficient and effective as the current systems, as there is a steady decrease in the amount of incidents. However, it must be considered that although incidents do take place, they are decreasing over the years. One of the many reasons for this small percentage of incidents taking place could be the negligence of shop floor employees and managers in relation to OHS. A second possible reason could be the lack of adequate training provided to management and employees. The emphasis

of the training could be misdirected as it emphasises the rules of the workplace rather than a broader OHS perspective.

Figure 8.3: The number of Injury on Duty Cases that occurred between 2001 and 2006



The year 2002 has the most recorded injury on duty cases. However, there has been a decrease in the amount of injuries that have taken place between 2003 and 2006. The least amount of injuries occurred in 2005 and 2006. This is evidence to suggest that management has the potential to ensure that no injuries take place on the shop floor, as they have the ability to maintain the trend of reducing the amount of injuries every year.

8.3.3 Minor incidences

Minor incidences are also referred to as medical incidences. They refer to incidences that require more than first-aid treatment, but no time is lost from work. Therefore, it is not a disabling injury.

TABLE 8.3: A Monthly Breakdown of the Current Minor Injuries

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
2001	25	38	44	52	36	35	39	10	40	30	44	25
2002	34	45	46	62	42	47	27	32	36	28	38	20
2003	29	34	28	18	26	14	18	15	13	21	22	7
2004	12	8	9	5	19	23	23	23	23	17	27	13
2005	18	17	26	18	12	11	9	15	13	18	19	14
2006	10	17	9	18	14	8	19	-	-	-	-	-

(DaimlerChrysler South Africa (Pty) Ltd, Safety Services Statistics 2001-2006, East London)

The highest numbers of current minor injuries were recorded in April 2001 and 2002. The least amount of injuries for the five year period was recorded in April in 2004, as only five injuries occurred. Although the number of injuries fluctuates from one month to the next, there is a decrease in the total amount of injuries that take place from year to year.

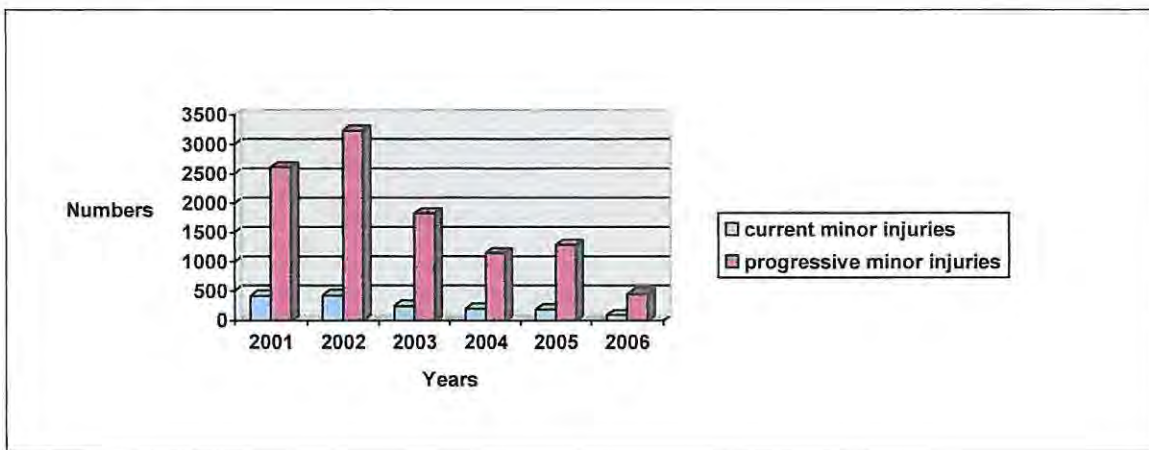
Table 8.4: A Monthly Breakdown of the progressive minor injuries

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	25	63	107	159	195	230	269	279	319	349	393	418
2002	34	79	125	187	229	276	303	335	371	399	437	457
2003	29	63	91	109	135	149	167	182	195	219	238	245
2004	12	20	29	34	53	76	99	122	145	162	189	202
2005	18	35	61	79	91	102	111	126	139	157	176	190
2006	10	27	36	54	68	76	95	-	-	-	-	-

(DaimlerChrysler South Africa (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

Progressive minor injuries are calculated by adding current minor injuries with the previous month's progressive minor injuries figure. Progressive minor injuries increase progressively from one month to the next. Despite them being high, they do reflect the actual decrease in the amount of injuries from one year to the next.

Figure 8.2: The number of current and progressive minor injuries for the period 2001 to 2006



The graph above indicates that medical incidences occurred at a consistent rate. It is interesting to note that the most injuries were recorded in 2002. In 2005 and 2006 the statistics reflect that the company has done well to decrease medical incidences by more than fifty percent compared to 2001 and 2002. Once again, it is evident that 2002 records the highest number of incidences while 2006 the least. This is evidence that the company's OHS systems are undergoing evaluation, monitoring and improvement to ensure safety in the workplace.

8.3.4 Lost time incidents

Disabling injuries are also referred to as lost time incidences. These refer to lost working day incidents, which require at times intensive medical treatment. This is calculated through the following equation: disabling injuries X 200 000/ hours worked. The current

disabling injuries frequency rate is calculated as follows: current disabling injuries X 200 000/ current hours worked. This is depicted in the table and graph below.

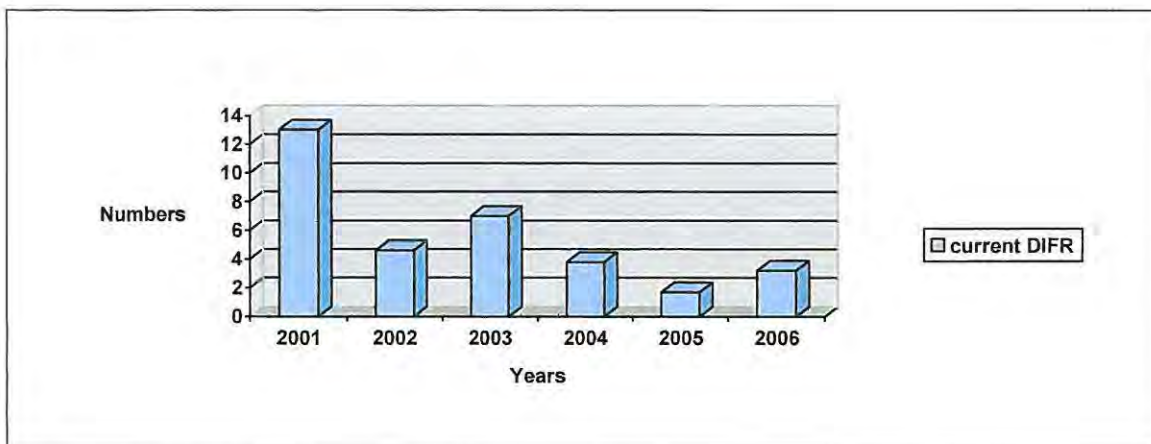
Table 8.5: A Monthly Breakdown of the Current Disabling Injury Frequency Rate

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	1	1	2	0	1	1	1	1	1	1	1	2
2002	0.4	1.0	1.4	0.0	1.2	0.0	0.0	0.3	0.0	0.3	0.0	0.0
2003	0.0	0.3	0.0	0.7	0.0	0.9	1.3	0.8	0.0	1.1	0.8	1.1
2004	0.7	0.8	0.0	0.0	0.7	0.4	0.4	0.0	0.8	0.0	0.0	0.0
2005	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.0	0.0	0.4	0.0	0.8
2006	1.8	0.0	0.0	0.5	0.9	0.0	0.0	-	-	-	-	-

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

The highest amount of current disabling injuries was recorded in 2001. No injuries were recorded in the months of February, March, June and July in 2005 and 2006. In the month of March, since 2003 up until and including 2006, no injuries have occurred. The month in which the highest number of injuries occurred is January 2006. Although disabling injuries are occurring in the workplace, their numbers are very low.

Figure 8.3: The Current Disabling Injury Frequency Rate of the period 2001 to 2006



It is clear so far that the only trend that can be identified in the graphs is a decrease in the amount of injuries that occurred over the years. The graphs do indicate that the figures have decreased since 2001, but they fluctuate from one month to the next. However, management has managed to maintain the trend of having less than five injuries in the workplace between 2004 and 2006.

Progressive and moving annual total frequency rate will only be depicted between the period 2001 and 2003. The decrease in these figures over the years is evident in this three year period. This trend is depicted in the tables and graphs below. Progressive disabling injury frequency rate is calculated as follows: progressive disabling injuries X 200 000/progressive hours worked.

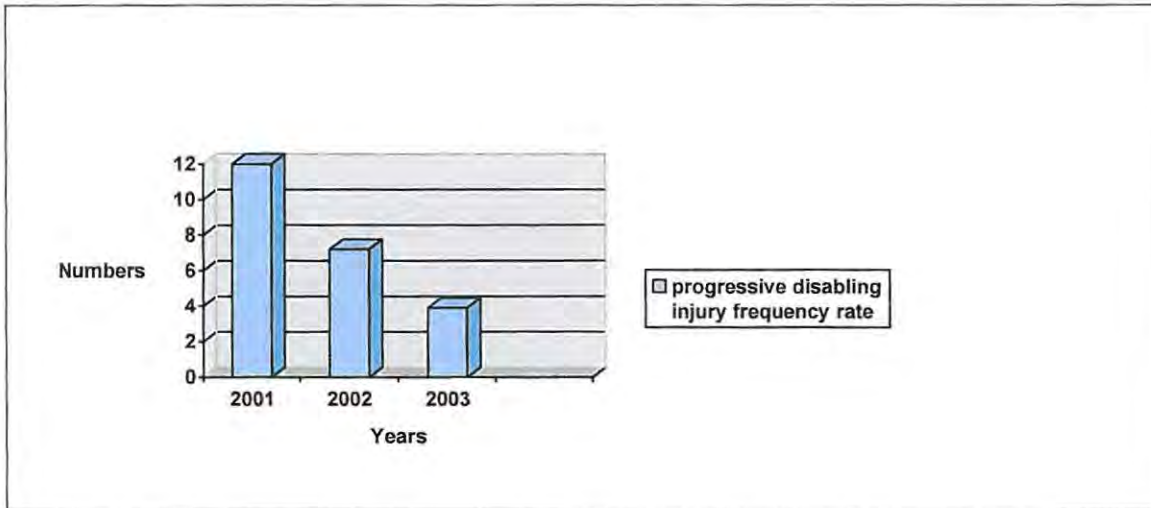
Table 8.6: A Monthly Breakdown of the Progressive Disabling Injury Frequency Rate

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	1	1	1	1	1	1	1	1	1	1	1	1
2002	0.4	0.7	0.9	0.7	0.8	0.7	0.6	0.6	0.5	0.5	0.4	0.4
2003	0.0	0.2	0.1	0.3	0.2	0.3	0.4	-	-	-	-	-

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2001-2003, East London).

The highest numbers of injuries were recorded in 2001. January 2006 is the only month since 2001 that no injuries were recorded. There has been a slight decrease in the amount of injuries that have taken place in 2003 since 2002. The only trend that can be identified is the decrease in the amount of injuries that have taken place in the company.

Figure 8.4: The Progressive Disabling Injury Frequency Rate for the period 2001 to 2003



It is evident that the most injuries took place in 2001. There has been a significant decrease in the number of injuries that took place in 2002 and 2003 since 2001. The least amount of injuries occurred in 2003.

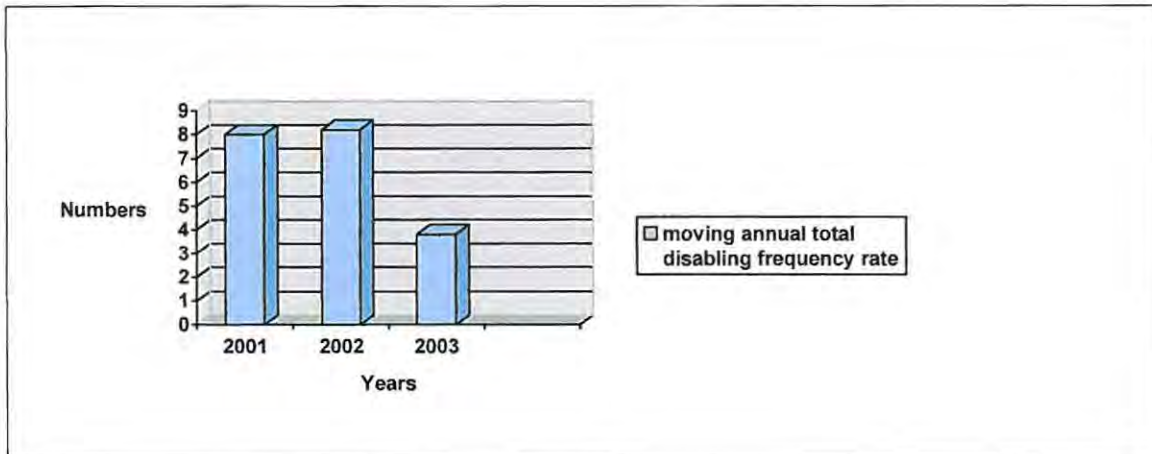
Table 8.7: A monthly breakdown of Moving Annual Total Disabling Injury Frequency Rate

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	0.3	0.4	0.5	0.6	0.6	0.7	0.8	0.8	0.8	0.8	0.8	0.9
2002	0.9	0.9	0.9	0.8	0.8	0.7	0.7	0.6	0.5	0.5	0.5	0.4
2003	0.4	0.3	0.2	0.3	0.1	0.2	0.3	-	-	-	-	-

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2001-2003, East London).

The moving annual total disabling injury frequency rate is calculated as follows: moving annual total disabling injury frequency rate X 200 000/moving annual total hours worked. The highest injury frequency rate was recorded in 2002 during the three month period between January, February and March. The lowest injury frequency rate occurred in 2003. Essentially there has been a decrease in the frequency of injuries since 2001.

Figure 8.5: Moving Annual Total Disabling Injury Frequency Rate for the period 2001 to 2003



Once again, the figures differ from month to month with the result that no negative trend can readily be identified. There has been an increase in the frequency of injuries in 2002, since 2001. However, there has been a decrease in the disabling injury frequency rate in 2003 since 2001. This proves that the systems put in place by management have become more effective, but could still be transformed to produce the desired effect of eliminating occupational accidents.

During the period 2003 to 2006, zero restricted work day cases were recorded by the company. Lost work day cases are composed of progressive disabling injuries, moving annual total disabling injuries and current disabling injuries. Disabling injuries are calculated by adding restricted work day cases and lost work day cases. However, the company did record lost work day cases. The frequency of this is depicted in the tables and graphs below.

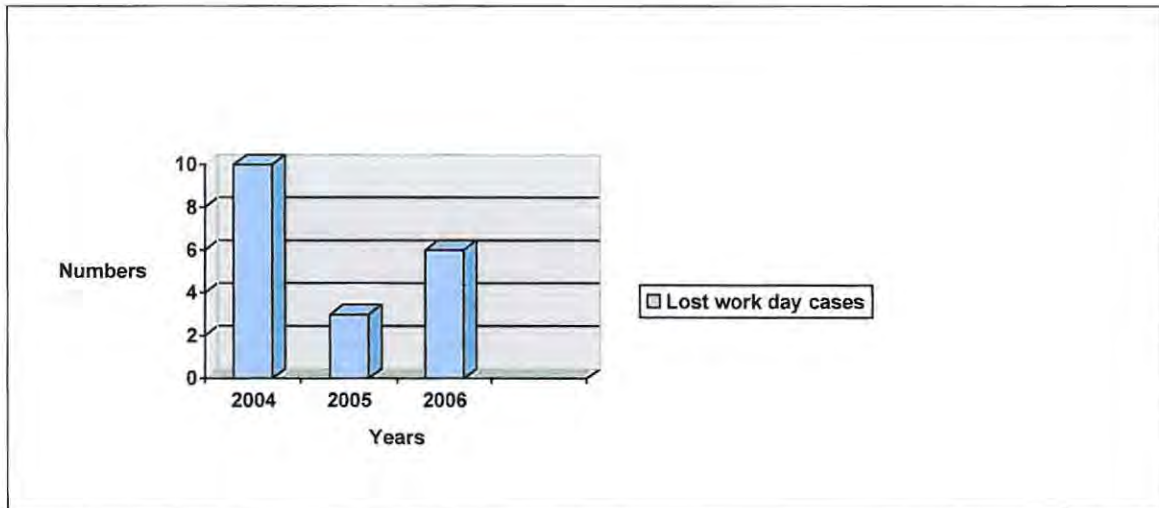
Table 8.8: A Monthly Breakdown of Lost work day cases

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2004	2	2	0	0	2	1	1	0	2	0	0	0
2005	0	0	0	1	0	0	0	0	0	1	0	1
2006	3	0	0	1	2	0	0	-	-	-	-	-

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2004-2006, East London).

The highest number of lost work day cases was recorded in 2004. The least amount occurred in 2005. Only three lost work day cases were recorded in 2005 during the months of April, October and November. The highest cases of lost work days for the period 2004 up until and including 2006 was recorded in January in 2006. The records of lost work day cases were high in 2004 they decreased in 2005 and have increased in 2006.

Figure 8.6: Lost Work Day Cases for the Period 2004 to 2006



As the graph above indicates, the management of the company has failed to maintain the trend of declining incidents that they have set, in relation to lost work day cases. They successfully reduced the number of cases in 2005, but lost control over it in 2006, as the

amount of cases increased by more than half when compared to 2005. An unstable trend has occurred regarding their incidences.

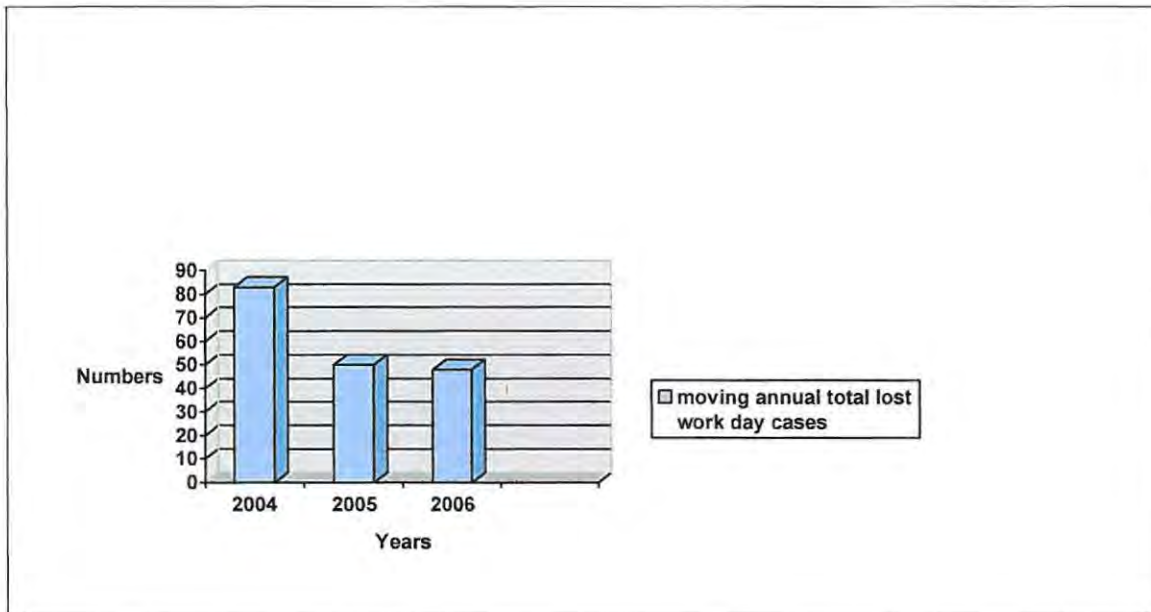
Table 8.9: Monthly Breakdown of the Moving Annual Total Lost Work Day cases

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2004	2	4	4	4	6	7	8	8	10	10	10	10
2005	8	6	6	7	5	4	3	3	1	2	2	3
2006	6	6	6	6	8	8	8					

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2004-2006, East London).

Moving annual total lost work day cases is calculated by adding the moving annual total lost work day case figure for the month to the lost work day case for the month. The highest cases were recorded in 2004. In the same year, the highest cases were recorded in September, October, November and December. In September in 2001, only one lost work day case was recorded. The number of lost work day cases for the first six months of 2006 is high, but it is stable. There is a decrease in the number of lost work day cases between the period 2004 and 2006.

Figure 8.7: Moving Annual Total Lost Work Day Cases for the period 2004 to 2006



It is evident that there is a decrease in the frequency of lost work day cases between the period 2004 and 2006. There is a significant decrease in the figures in 2005 since 2004. In 2006 there is only a slight decrease in the incident figures compared to 2005. Despite this, management is successfully maintaining the trend of decreasing the incident figures when compared to that of previous years.

Table 8.10: A Monthly Breakdown of Current disabling injuries

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	1	2	7	1	5	5	2	1	2	3	2	4
2002	1	3	4	0	4	0	0	1	0	1	0	0
2003	0	1	0	2	0	2	3	2	0	3	2	1
2004	2	2	0	0	2	1	1	0	2	0	0	0
2005	0	0	0	1	0	0	0	0	0	1	0	1
2006	3	0	0	1	2	0	0	0	0	0	0	0

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

In March of 2001, the highest number of current disabling injuries is recorded for the period between 2001 and 2006. Since 2003 up until and including 2006, no current disabling injuries were recorded in the month of March. The lowest number of current disabling injuries was recorded in 2005, as there was only one injury in April, October and December. The month of January in 2006 has the highest number of disabling injuries.

Table 8.11: A Monthly Breakdown of Progressive disabling injuries

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2001	1	3	10	11	16	21	23	24	26	29	31	35
2002	1	4	8	8	12	12	12	13	13	14	14	14
2003	0	1	1	3	3	5	8	10	10	13	15	16
2004	2	4	4	4	6	7	8	8	10	10	10	10
2005	0	0	0	1	1	1	1	1	1	2	2	3
2006	3	3	3	4	6	6	6					

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

In 2001 the highest numbers of progressive disabling injuries were recorded. The month of December in 2001 was the month in which the most disabling injuries occurred. The least amount of injuries occurred in the year 2005. However, the amount of disabling injuries has decreased annually since 2001.

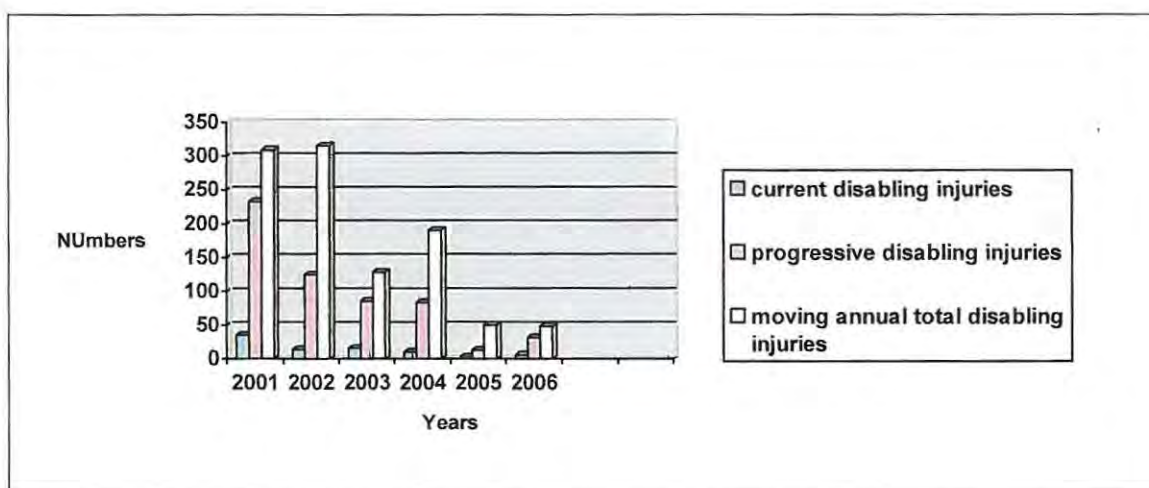
Table 8.12: A Monthly Breakdown of Moving annual total disabling injuries

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
2001	12	13	20	21	24	29	31	31	30	32	31	35
2002	35	36	33	32	31	26	24	24	22	20	18	14
2003	13	11	7	9	5	7	10	11	11	13	15	16
2004	18	19	19	17	19	18	16	14	16	13	11	10
2005	8	6	6	7	5	4	3	3	1	2	2	3
2006	6	6	6	6	8	8	8					

(DaimlerChrysler (Pty) Ltd, Safety Services Statistics 2001-2006, East London).

The month of December in 2001 has the highest record of disabling injuries. In 2005 the month of September has the lowest recorded number of disabling injuries for the period 2001 to 2006. Again management has successfully maintained the trend of decreasing the number of incidents annually.

Figure 8.8 Disabling Injuries for the period 2001 to 2006



Again it is not possible to identify a specific trend. There has been a decrease in these figures since 2001. The period between 2001 and 2002 show the highest figures. This confirms management's argument that their OHS systems and structures are evaluated and improved on regularly, but this needs to be more consistent. The fact that the figures fluctuate from one month to the next could be evidence to this.

As mentioned earlier in the chapter, there are many possible reasons and causes for the existence of workplace incidents. Many of the possible reasons have been briefly highlighted in previous chapters through the experiences and challenges of the employees and management in chapters four and six. The occupational health nurses have also identified some of the probable causes of the reason why incidents take place in the plant. The reasons include the following:

- Lack of effective communication structures that exist between management and employees.
- Inefficient communication systems on the shop floor between health and safety representatives and employees.
- Disregard and non-compliance for the OHS rules and requirements by management and employees.
- Insufficient communication between the occupational health and safety departments.
- The occupational health nurses are serving a primary health care role.
- The occupational health nurses are not communicating regularly and efficiently with the shop floor employees.
- Managements' confirmation that they are not routinely monitoring the compliance by production managers to OHS provisions.
- Production managers prioritise occupational safety before they do occupational health rather than creating a balance between the two.

Despite this, the current trend is a reduction in the occurrence of safety incidents. From the figures provided it can be concluded that a significant improvement has been made in relation to incidents in the company. This is proof that incidents can be eliminated, as management has the resources and the infrastructures.

The safety specialist made evident that, included in the company statistics is an analysis of essential information such as the area in which the incident occurred, the nature i.e. seriousness of the incident, whether the cause of the incident was due to an unsafe act of the employee or environmental factors such as machine breakdowns, as well as the actual times of the incidents and the week in which the incident occurred. A useful piece of information to include is the possibility of employee exhaustion. This could be determined by questioning when most accidents happen: late afternoon, in the evening, towards the end of a shift or end of a working day or due to the physical nature of the work on the assembly lines. A comprehensive break-down of incidents, as indicated by DCSA East London assists in immediately identifying the weaknesses in their monitoring and evaluation systems of OHS incidents. This assists management and other role players in focussing on the areas identified as critical to the health and safety of the shop floor employees (Vernon Moonieya, 20 September 2006).

Although near misses are reported by employees, they are not analysed and compared with other forms of incidents. Near misses should be regarded and treated as a potential incident and investigated as such, so as to prevent an incident of similar nature occurring again. Near misses should be analysed thoroughly as this could forestall an incident happening again. This is every important as near misses are threats to the safety of employees at the shop floor level. All reported near misses should be recorded and analysed as potential incidences.

8.4 WHAT ARE THE COSTS OF INCIDENTS TO THE COMPANY?

The cost of occupational accidents to a company is huge. Although DCSA East London has managed to reduce their incident figures over the years, those that do occur still cost

the company money. This brief discussion of the direct and indirect cost of incidents in a company has a direct impact on DCSA East London. Vernon Moonieya emphasises that “presently a company’s wealth is in the knowledge of the employees rather than their assets” (Safety Specialist, 20 September 2006). Therefore, it is in the best interest of DCSA East London to ensure the OHS of every single one of their employees through implementing systems and ensuring that they work well.

8.4.1 Direct Costs

This is the actual cost of treating injured workers for the company. Compensation is offered to the workers as a consequence of being injured as well as the cost of wages. The costs to employers of occupational accidents are estimated to be enormous. Direct costs tend to be those associated with the treatment of the injury and any unique compensation offered to workers as a consequence of being injured and are covered by OHS compensation insurance premiums. Direct costs include the cost of medical care for the injured and or disabled, the payment of pensions to the family of the deceased workers and the cost of wages (Smallwood, 2000: 23).

In the view of the ILO (cited in Burger, 2006: 22), the direct cost of accidents to employers include:

- payment for work not done;
- medical and compensation payments;
- repair or replacement of damaged machinery and equipment;
- reduction or a temporary halt in production;
- increased training expenses and administration costs;
- possible reduction in the quality of work; and
- negative effect on the morale of other employees.

The direct costs of accidents to employees according to the ILO (cited in Burger, 2006: 22) include:

- the pain and suffering of the injury;
- the loss of income; and
- the possible loss of job together with health and injury care costs.

8.4.2 Indirect Costs

The indirect cost of accidents to a company is huge. As Levitt and Samelson (cited in Burger, (2006: 156) make apparent, “indirect costs are far greater than direct costs and affects the profitability of a company”. In the opinion of the National Safety Council (in the United States) and other safety organisations, indirect costs on average exceed direct costs by a ratio of 4:1. It has been reported that indirect costs can be as high as 8:1 compared to direct costs (Health and Safety Management, February 1998). Some of the indirect costs, according to Dos Santos (cited in Burger, 2006: 22), include:

- hiring and training replacements;
- investigation time;
- wages paid to injured other than compensation;
- over-time costs;
- extra supervisors time;
- decreased output of injured worker on return;
- cost of training new worker;
- cost of hiring back up worker;
- building and property damage;
- time spent away from job by the injured person and co-workers in attendance;
- time spent by first-aider attending injured person;
- increased insurance premiums;
- fines and legal costs;
- medical expenses;

- finding alternative work for an employee who is unable to fulfil previous job commitments;
- loss of investment in employee development when the individual is forced to retire early; and
- potential for unsatisfactory employer and employee relations.

Hence, it is profitable to reduce accidents, damage and minor issues which have the ability to easily turn into major issues. Research conducted by Bentil; La Bar and Synnet (cited in Burger, 2006: 24) indicates that there is a substantial return on investment in health and safety. However, this point is not the primary reason for DCSA emphasising the OHS of their employees, as chapter seven makes evident. Dr Clifford Panter emphasizes that

for us at DaimlerChrysler the cost of labour, including the cost of all these programmes is a minuscule part of the input process. Therefore, the business case for promoting occupational health and safety is pushed hard and supported by executive management. I am not prepared to say that there is a massive investment in return for health. Investment on return regarding health is long-term. The company has put in a long term effort and we are confident that we will get a long-term benefit" (Group Medical Advisor, 22 July 2005).

The management of DCSA East London confirms that often there is no saving to be made in health promotion, but management will incur less of a financial impact by implementing it, than they would by not.

This chapter focused solely on work related incidents at DCSA East London. The findings indicate that there is a definite decrease in workplace incidents in the company, especially between the periods 2004 and 2006. This could be evidence of the argument in chapter three that managers are taking a more active responsibility for the OHS of the employees when compared to the past i.e. pre-1994. It also confirms the arguments made by employees in chapter four that they have experienced either very few minor incidences or no incidences at all. It also confirms management's argument in chapters six and seven that although they do have comprehensive OHS systems in place to ensure

the safety and health of their employees, there is still room for improvement. This is evident in the fact that accidents still do happen.

The only trend one is able to identify according to the statistics and the opinion of the Safety Specialist is that “things have normalised and this is shown through the ability of this company to perform normally in terms of OHS” (Vernon Moonieya, 20 September 2006). As mentioned earlier in the chapter, even with the most comprehensive systems, management and employees still find loopholes to evade their OHS responsibilities. The fact that management is committed to reduce work related incidents is shown through their comprehensive monitoring systems outlined in chapters six and seven. Managements’ ultimate objective should be to have no work related incidents, but this is not realistic due to employees finding ways of evading their responsibility even though management has implemented comprehensive OHS monitoring systems.

Conclusion

While management is successful in achieving their goal of reducing the total amount of work-related incidents, they are not effectively achieving their most important goal of eliminating work-related incidents. However, the challenges faced by management mentioned in chapters six and seven must be considered, as they contribute to the amount of work related incidents in the company. Therefore, it can be said that the efficacy with which management enforces the provisions of the OHS policy in the workplace, with one of their aims being a reduction of work-related incidents, cannot be analysed in isolation of factors such as managerial commitments, trade union involvement, sufficient OHS training and information, as well as employee participation. These factors, as all the previous chapters have mentioned impact on the efficacy of management in reducing the occurrence of occupational incidents.

9

CONCLUSION

9.1 GENERAL OVERVIEW

DCSA East London management has put comprehensive OHS structures in place. More than one area of the thesis highlights that the mere existence of OHS policies, does not always result in their provisions being effectively and efficiently implemented with the aim of establishing safe working conditions without accidents and hazards. Not all managers are focussed on OHS in their divisions, as production is a competing priority. This however, does not mean that they ignore the significance of prioritising it. It is important to remember that managements' core objective is to build cars in order to make a profit so that they are able to keep people employed. On more than one occasion managers have turned a blind eye to the negligent OHS practices of their colleagues and employees. When an OHS incident occurs, management tries to find fault with the actions and conduct of the employees resulting in the accident. A large percentage of managers agree that most times it takes a serious accident to provide them with a wake up call because

it is always like that. That is just the way it is Hames (cited in Roughton and Mercurio, 2003: 78).

A small percentage of managers have adopted an attitude that the employees have been performing their job tasks for many years and take for granted that in the event of danger, with their accumulated experience, employees would be able to protect themselves regardless of the circumstances. This indifferent attitude of management is the most common hazard found in many workplaces. Employees agree, despite the few short comings experienced, that the current state of OHS in the workplace is above the minimum required standard. Employees also have to play their part in ensuring a successful OHS policy implementation. A small percentage of employees share the casual attitude of management towards OHS through not wearing their PPE, disregarding the provisions of the OHS management policy and not abiding by their shop floor managers' OHS requests.

A small percentage of employees have developed the attitude that OHS is solely management's responsibility. This is a naive perception as successful OHS programmes require team work. Such attitudes of employees contribute to the development of unsafe work practices. It is easier for employees not to recognise and accept their responsibility and blame management for not effectively training and supervising them or updating and maintaining their equipment if an accident occurs, relieving them from responsibility and blame. It is not only managers who take the dangerous aspects of the workplace for granted, but the employees too. On the contrary a large percentage of employees embrace their OHS responsibility, as they hold the opinion that it is not just managements' duty to ensure safe working conditions, through recognising their responsibility to abide by the provisions of the policy. There is an understanding among this group of employees that it is their responsibility to look after their own health and safety because if they do not, management will not. These employees are taking an active stance against unsafe working conditions.

Management has granted employees numerous opportunities to bring forward their OHS suggestions for improvement, but not many employees are actively involved in this initiative. This has been made possible through the provision of communication channels

to express their views, suggestions and concerns. However, many employees find it easier to remain blinded to the negative OHS situations in their workplace. Good working conditions are achieved if both employers and their employees are able to work well together. The responsibility for doing so lies with both parties. A prerequisite for successful OHS initiatives is internal co-operation between management, employees and their representatives.

Effective employee involvement in OHS through building partnerships between the trade union and management results in safer work places and ensures that the trade union members have a say in issues affecting them and their work (Burger, 2006: 39). Burger (2006, 39) emphasises this further in the following quote “ideally workers should be empowered to improve working conditions by their own action, they should be provided with information and education in order to produce an effective response to health and safety problems”. However, this research shows that many workers believe that occupational injuries and hazards occur due to the lack of sufficient resources being allocated to training as well as ineffective participative structures. The trade union leadership has been said to be inadequately educated regarding OHS resulting in its inability to participate and represent their members’ interests effectively. This has a negative impact on health and safety.

Occupational health nurses are experiencing a crisis, as they find it difficult to achieve their primary objective. Their focus is supposed to be on occupational health, but the demand from the shop floor is for primary health care. The result is that their work becomes more reactive than proactive in relation to occupational health. This impacts occupational safety generally in the plant, but more specifically, the occupational health of the employees on the shop floor is not effectively and efficiently monitored and regulated. Occupational health nurses are not meeting their objectives such as performing their planned schedule of plant walk-Abouts. This decline in communication between themselves and the employees on the shop floor results in the OHS needs, concerns and suggestions of the employees not being adequately evaluated and addressed. Production managers also do not provide the medical department with the opportunity to realise the

ability of their services and structures to positively impact the occupational safety of the employees. Managerial action to support this argument is through them not encouraging employees to address their occupational health concerns, as it interferes with production time. This has been stated by the words of a divisional manager. This managerial line places more emphasis on occupational safety than they do occupational health. Managers do not realise that through their promotion of occupational safety together with occupational health they are improving and increasing productivity levels in their work environment through boosting employee morale and satisfaction.

The fact that the key focus of the occupational health nurses is changing can be a reflection of the attitude and perceptions of production managers' and their employees' regarding OHS in general. The occupational health nurses make it evident that previously managers did not prioritise OHS. A large percentage of management and employees were ignorant about the hazardous nature of the chemicals they were working with. The occupational health nurses were also not aware of what chemicals were entering the plant resulting in their inability to efficiently carry out their objective of securing the health of the employees. Since then, comprehensive monitoring systems have been put in place only for some aspects of OHS leaving the rest vulnerable. The communication structures in place within the company are no longer effective as weak points in the system have been identified by management and employees.

9.2 MANAGERIAL ACTION AND ATTITUDES INFLUENCING EMPLOYEES

The efficacy with which management practices their duties and responsibilities has a definite impact on OHS in the workplace. The attitude and the actions of managers have different kinds of impacts on the different areas in the company in relation to OHS. This impact can either be positive or negative. Management's commitment to OHS is shown firstly, through their active participation in OHS and secondly, through them being the driving force behind OHS initiatives. If the actions of managers do not support OHS as a

priority, it impacts the employees negatively. This statement can be qualified through the example of the colt division and the bodyshop management in chapter four. The colt division management are not prioritising OHS as effectively as they should, resulting in the employees adopting the same attitude. Managers do not see a problem with OHS hazards such as spray-painting on moving lines, not wearing the correct PPE and driving units in and out of the division without valid driver's licenses. Those employees who understand the importance of being alert to the OHS dangers are trying to educate their managers and their fellow employees about the effects of these hazards, but their efforts are in vain.

The bodyshop managers are also not portraying responsible OHS actions and attitudes as the employees have made it apparent that OHS meetings do not take place regularly. The employees in this division feel that managerial actions and attitudes are not resulting in OHS being stressed enough. It is felt by some employees that managements' knowledge regarding OHS requires reviewing. There is also a lack of useful, practical and OHS specific information provided to employees during the safety meetings. Employees feel that each division should receive specific OHS educational and informative information that is relevant to the conditions in their divisions, in these meetings. Although managers in some divisions have regular OHS meetings, the information provided to employees in these meetings is not as beneficial as it could be. An extensive reworking of this practice is required.

Many of managements' actions contradict the provisions and objectives contained in the OHS policy and legislation. This example also confirms the weakness of OHSA identified in section 3.3. These actions do not benefit the employees or OHS in general. An example to prove this is the fact that management of the bodyshop has forced an employee to perform an operation which the medical department has declared him unfit to perform. This action has left employees with the attitude that management is not concerned with their wellbeing and neither are they committed to OHS. The conclusion drawn by the employees is that the shop floor management's OHS practices are a waste of time, as they result in employees adopting an indifferent attitude towards OHS.

Managers in the bodyshop are also not practicing what they preach in relation to OHS. Employees have made it apparent that the managers walking through the bodyshop do not wear long sleeved overalls which is the compulsory PPE, but employees are expected to. The conclusion that a large percentage of bodyshop employees have come to is that for some managers production will always take precedence. This is evidently shown through the actions and attitudes of management. The result is that employees feel that their health and safety is not considered a priority. An important distinction to make, shown by the research, is that the practices of top management are supported by the employees, but middle and lower managerial practices receive minimal support.

In the rest of the divisions, managerial practices have had a positive influence on the employees and on OHS in general. The employees are encouraging each other to uphold safety measures and to adhere to the specific and general OHS guidelines of the division and the company as a whole. In divisions where OHS is held in high esteem by management, employees are made aware of all the dangers in the division, as well as the necessary actions to avoid the hazards and what to do in the event of danger. Managerial practices have the ability to boost the OHS morale of the employees and encourage the employees to take ownership of OHS in their divisions. Employees are encouraged by management to air their OHS concerns. Managers often listen, but do not react immediately resulting in employees becoming despondent, not having open communication relationships with management and sharing concerns with their fellow employees rather than management. Employees, whose managers are not efficiently prioritising OHS, have lost faith in their abilities. It is therefore, essential that managers provide their employees with sufficient resources to enable them to take care of their own health and safety. One of these resources is training and information.

Management also provides resources for employees and trade union representatives to attend training courses with the aim of building on their existing OHS knowledge. However, managers once again do not realise the significance of these initiatives to achieve improved OHS levels and ultimately productivity levels. The weaknesses of the

training initiatives have already been made evident. It is apparent that management has not implemented a process of reviewing and improving their training initiatives. Training is scheduled in advance enabling managers to plan ahead so that they are able to consider their production targets. The current situation is that managers are reluctant to let their employees off, due to their need to meet production and marketing targets. Such practices of management impacts OHS directly in a negative manner. The training that the employees are currently receiving has been evaluated as being ineffective in relation to OHS, as employees are admitting to not being effectively prepared for OHS emergencies. It is for this reason that involving employees in determining their training needs is crucial to ensure the success of the training. Employee participation in general in OHS issues is pertinent in securing effective and efficient OHS standards.

Although all of the managers insist that they are using participatory managerial practices, in reality they are still authoritarian in nature. Managerial communication initiatives are not effectively delineated from their participation initiatives. Employees have an understanding that communication initiatives are participatory initiatives. In reality management has implemented pseudo participation rather than full participation schemes. At times the communication systems that they implement serve the same purpose that participatory initiatives would. Employees lack the knowledge to comprehend the underlying differences in principle between these two approaches. The actions of many employees are evidence to support this.

Through employing such strategies management is able to gain collective employee reaction and commitment to their structures. The strategies can therefore, be said to be management friendly rather than employee friendly. The strategies are employed with the aim of advancing managerial interests. If employees do not pick up on this they do not benefit. The surface view of these strategies is different to the underlying view and many employees together with the trade union do not understand the core underlying principles of them. Management has the ability to manipulate their OHS duties and responsibilities, but the end result does not always guarantee long term benefits, as the employees begin reacting to managements' actions in a manner not anticipated by management. Evidence

9.3 MANAGEMENT'S INFLUENCE ON TRADE UNION INVOLVEMENT

Managers shape the participation of the union. Managers take for granted that the trade union is actively communicating with the employees on the shop floor. If no concerns or suggestions are brought to their attention, management assumes that the parties are satisfied. Some managers are hesitant to include the trade union in such discussions on a regular basis, as they feel that the trade union is not knowledgeable enough for the process to produce valuable results, as the union possess no knowledge of the legislative provisions of OHSA. Management has allowed the participation of the trade union in regard to OHS, but their participation is governed by a strategy of maintaining managerial control and avoiding any unnecessary conflict that might spill over into their production time. Management is not treating the trade union unfairly, but rather takes advantage of the weaknesses of the union. Management has also provided support structures for the union, but the union is not making use of these strategically.

Management's actions and attitudes also have a definite impact on the involvement of the trade union in OHS matters in the company. The practices of management have the ability to enhance the OHS activity of the trade union, but the union is not taking advantage of this opportunity. The union does not seem to have the ability to independently initiate OHS discussions with management. For this reason management has developed strategies manipulating the trade union's participation in OHS matters. Sometimes this could arguably be justifiable, as the union is unable to make the contribution that it should. This is the reason why management sometimes does not want to involve the union in all OHS consultations. Trade unions possess the potential to play an important role in increasing workplace safety levels and thus reduce the incidence of workplace accidents. The principal ways in which the trade union provides a source of regulation are political processes and collective bargaining.

The trade union is realising the importance of protecting their members not only from wage discrimination, but also from hazards that occur at the workplace. The trade union at DCSA East London has contributed greatly to ensure health and safety standards, although their impact could be more lasting. However, an enormous amount of work still remains to be done to improve the ability of the trade union movement to intervene effectively in these matters. Other disputes tend to dominate the agenda, such as HIV/AIDS whereas health and safety issues normally take a back seat. As unions become more and more involved in OHS matters, management will see that it is clear that OHS standards can no longer follow a top down approach where management alone decides what is safe and what is unsafe. Trade unions are there to protect the rights of its workers and safety at work is a fundamental right which must be protected.

The trade union is currently not very active in relation to OHS on the shop floor and in the plant in general. Not much OHS awareness is being carried out on the shop floor or with top management, making their role largely reactive rather than proactive. This might be due to the lack of adequate OHS knowledge on the part of the trade union. The ability of the trade union to look after the interests of their members can be questioned. The trade union has the ability to play a more active role in OHS in the company. Other focuses of the trade union have been prioritised such as HIV/AIDS. The trade union however supports management's OHS practices one hundred percent. They do however feel that management does have the ability to be more committed towards OHS without disturbing production targets.

9.4 THE CHALLENGES FACED BY MANAGEMENT, EMPLOYEES AND THE TRADE UNION

The challenges faced by management, employees and the trade union impact on each other. Management's central challenge is the educational level of the workforce resulting in negative impacts on OHS in the company. This impacts the standard at which their training initiatives are set, as the employees have different educational backgrounds,

posing a challenge for management and the employees. This is linked to the challenges faced by the employees, as they feel that the OHS training provided to them is inadequate, irregular and not OHS specific contributing to their low OHS knowledge. Management contributes to the problem by being reluctant to release their employees for training. Management accuses employees of having an immature attitude towards OHS and not adhering to their guidelines or that of the company. At the same time, the employees have made it evident that management too, does not always practice what they preach. This relates to the challenge faced by the trade union regarding management's uncooperative attitude that production takes precedence. Managers, trade union representatives and employees need to work together as a team to eradicate the obstacles preventing the development of safe work practices. Formal communication practices need to be in place so that together they can evaluate their challenges and strategise solutions.

9.5 COMMITMENT TO OCCUPATIONAL HEALTH AND SAFETY

Managerial commitment is a prerequisite for successful OHS. Management has taken the responsibility for establishing OHS objectives. They have developed actions to achieve this objective and allocated the necessary resources. They have implemented a comprehensive OHS system however; its efficacy can be questioned. They do not always lead by example and have assigned accountability within the system, but they are not adequately monitoring it. Top management is convinced that an OHS programme is beneficial for the workplace, but not yet convinced that all production management are. Therefore, the desired level of commitment has not yet filtered down all managerial levels. It can therefore, be concluded from the research that managers at DCSA East London are committed, but they could be more committed.

The existence of an OHS management policy is only one way for management to portray their commitment. Other methods are the walk-about that are conducted, the Action Centre meetings, attending the OHS meetings on the shop floor with team managers,

initiating training, being accountable to the OHS actions of all managerial lines, regular injury analysis and supporting and recognising the OHS efforts of shop floor management and employees. Managers, who have an indifferent attitude towards OHS, have employees who have developed the same attitude. On the other hand, the managers who have been proactive with regard to OHS are showing increasingly positive OHS results. These managers have a passion for securing the health and safety of their employees by realising that they (employees) are an important factor in achieving their production targets. This passion spills over onto the employees, who then become aware of the OHS factors of their jobs. It is therefore, crucial that appropriate strategies be employed that consider this aspect.

Most managers, employees and shop stewards are committed to OHS, but their commitment does have the ability to be strengthened. There is still no concrete answer for the lack of commitment towards OHS by management, besides the need to remain profitable through a reduction in labour costs. Through managements' commitment to OHS being affirmed, the employees are more likely to improve and increase their commitment.

There are positive aspects to implementing effective OHS structures. These have been made evident throughout the research. Some are an increase in profits, increase in labour productivity, employee moral is lifted, the company creates a caring image for the employee, the employees' commitment to the company is increased and there is a reduction in absenteeism. Management, employees and the trade union need to be made more aware of their gains of implementing such structures, by outlining the consequences of having no OHS provisions in the workplace. The outcome can be devastating to management, the employees and the company's viability.

In conclusion therefore, regardless of the provisions of OHSA together with the OHS policy, there is not much evidence to suggest that the existence of an OHS policy ensures the development of a safe workplace. Secondly, there is evidence to suggest that management has the primary responsibility to implement and practice the provisions of

such a policy, but they are not making a difference that contributes one hundred percent to the safety level of the plant. Thirdly, management's actions have a definite impact on the actions and the attitude of the employees and the trade union in relation to OHS. Their actions and attitudes also affect their commitment as well as the commitment of the employees and the trade union. In conclusion, the efficacy with which management implements the provisions of an OHS policy is questionable.

9.6 DIFFICULTIES EXPERIENCED DURING THE STUDY

Difficulties experienced during this research are highlighted as follows. The first is a language barrier experienced between the researcher and a few of the respondents. The interviews were conducted in English which is the first language of the researcher and English, Afrikaans and Xhosa speaking subjects were interviewed in English, being their second or third language. The result is the misinterpretation of questions and answers by the subjects and the researcher. Added to this is that meaningful and significant material are lost in the process. The second is the employees feeling insecure and not openly sharing their experiences because they fear management's reaction. Others feel that it is pointless sharing their experiences as nothing ever gets done about their OHS suggestions and concerns. A small percentage of managers also felt threatened by the fact that a student was questioning their structures, resulting in them trying to overpower the interview.

Busy work schedules and time constraints posed a further limitation as some of the interviews were conducted within the organisation itself and in some instances in offices next to the production line. Some employees were hesitant to answer various questions, particularly those related to organisational factors. In order to save some of the production time being lost due to the interview, respondents kept their responses brief in some cases.

A possible bias could exist as a result of those not interviewed. They could have different experiences and perceptions of OHS to those interviewed. The interview sample is limited for the reason that the research focuses exclusively on DCSA East London. The sample comprises only of DCSA East London employees, with the outcome of the results not being generalisable due to the characteristics of the data. Further research will need to be conducted to gain additional insight into various other industries. Burger (2006: 8) explains that, “the exploratory-descriptive design used in the study limits the validity of the findings because the design may not provide conclusive answers to research questions, but rather insight”. However the aim of this research is to explore the respondent’s experience of health and safety practices in the workplace rather than to provide conclusive answers.

9.7 RECOMMENDATIONS

- At the reception area, while visitors are waiting to be escorted by their guests, a ten minute educational video on OHS in the workplace could be shown to them. The video could address firstly, what to be mindful of regarding health and safety precautionary measures in the plant. Secondly, what signs to look out for and the meaning of the signs. Thirdly, what the different road markings mean in relation to safety. Fourthly, what the specific hazards are in certain production areas. A pamphlet could also be designed with this kind of necessary and educational information. Pictures are remembered more easily by people. Rather than displaying magazines in the reception area, OHS awareness pamphlets could be displayed.
- The waiting rooms/reception areas at the wellness centre are problematic. The reception desk is in the same area as the waiting room so the patients’ confidentiality is not respected, as all the other patients waiting for their appointment hear the ailments of the other patients. One of the many possible solutions is that the waiting room be separated from the reception desk, by either sliding doors, or a wall. The reception desk and waiting room is also right by the

entrance to the wellness centre with the result that any individual who walks through the door and is not necessarily coming to see a medical practitioner, sees and can hear the medical concern of the patients. Although it is more than likely that the patients are acquainted with each other in some way, they might not feel comfortable discussing their medical concerns in front of them.

- There should be increased interaction between all managerial lines and the shop floor in relation to OHS. This could possibly be done through regular planned walk-about, initiating more participative structures rather than communication structures. The communication structures that are in place require substantive revision. Regular follow-ups should take place between managers and the employees through the implementation of effective monitoring and regulatory systems. The suggestion made by employees regarding an aspect of the newsletter, 'The Star' being devoted to OHS is a possible solution. Another way of achieving this is having a 'role reversal day' where management works on the shop floor for a day and the shop floor employees work in offices of management. The aim of this exercise would be to provide each party with first hand insight into a day in the life of the other, so that they able to identify with the working reality of the other.
- The trade union requires intensive training of an OHS nature so that they can have a broader knowledge to enable them to participate meaningfully.
- Training in general that is provided to the employees needs to be continuous, in accordance with the specific duties of the employees and OHS specific. One day's OHS training is not adequate to fully understand their OHS responsibilities.
- Emphasis needs to be placed on the OHS role of management, the trade union, safety representatives (staff committee representatives and health and safety committee representatives) and employees with the aim of enhancing their understanding. This will result in management becoming aware of the actual, rather than the perceived perceptions of the employees and the trade union in relation to their OHS systems.

This research makes a contribution to the broader knowledge base of OHS. The work of many researchers can be considered to be management friendly. This research attempts to take into consideration the experiences of the employees, the trade union and management. It also provides a comprehensive evaluation of the OHS actions and practices of management, employees and the trade union that is taking place in the company, whereas other researchers focus on the theoretical aspects, more than the practical. This research attempts to create a balance of these aspects. South Africa lacks current OHS research and this project is an attempt to lay a foundation for further research.

APPENDIX A

INTERVIEW SCHEDULE: PLANT SAFETY ENGINEER

1. Tell me about your safety policy?
2. What are the company's goals and objectives regarding occupational health and safety?
3. What are the primary goals of upper, middle and lower management as well as supervisors in relation to occupational health and safety?
4. How do you enforce these legislative requirements? It all sounds good in theory, but what is actually taking place in practice?
5. How do employees get involved to ensure their participation in the development of training needs?
6. Why do the employees not have any input in the development of training needs?
7. Describe your occupational health and safety responsibilities and level of authority?
8. How do you view contractors in relation to occupational health and safety i.e. their training and level of awareness regarding occupational health and safety or is that irrelevant in making your choice of contractor?
9. Tell me about the general safety and health responsibilities of management, supervisors and employees?
10. In what ways do you participate in occupational safety and or health activities?
11. How do you encourage employee involvement in occupational safety and health?
12. Describe your process, as the plant safety engineer, for evaluating and updating your occupational health and safety system?
13. Tell me about your system, as the plant engineer, for identifying and correcting your safety and health hazards?
14. Do you think that it is possible to separate occupational health and safety from top

management's responsibility? If so how? If not why? And what effect would this have on occupational health and safety?

15. In conclusion is there anything else that you would like to add?

INTERVIEW SCHEDULE: SAFETY, HEALTH, ENVIRONMENTAL AND QUALITY MANAGER

1. Tell me about your safety policy?
2. What are the company's goals and objectives relating to occupational health and safety?
3. Describe your occupational safety and health responsibilities and your level of authority?
4. In what ways do you participate in occupational safety and or health activities?
5. How do you encourage employees to become involved in this process?
6. How often do you communicate with the employees?
7. Could you describe your process for evaluating and updating your occupational health and safety system?
8. Could you tell me about your system for identifying and correcting occupational safety and health hazards?
9. Who are the information gatherers on the shopfloor for you?
10. How is this information gathered?
11. Are there joint procedures between yourself and the workers that have been put in place in relation to occupational health and safety matters?
12. What methods of communication have been put in place by you in relation to Occupational health and safety?
13. How often does this communication take place?
14. If the company's occupational health and safety policy is working effectively at this stage, how do you think the plan would look in five years time?
15. If you were in a position to make any changes, what changes would you
16. How do you prioritise occupational health and safety matters when there are

- more pressing and immediate matters that arise?
17. What do you understand by the term 'reasonably practicable' in the context of the Occupational Health and Safety Act? What are your views of replacing it by the phrase 'the best practicable means'?
 18. What do you think are the benefits of implementing an occupational health and safety management policy in the company?
 19. What are the challenges faced by you in implementing an effective occupational health and safety management policy?
 20. What do you consider to be the major barrier to improving occupational health and safety in the company?
 21. What do you think should be done about these barriers?
 22. Are employees involved in defining training needs?
 23. Can you explain your current relationship with contractors to me in relation to occupational health and safety?
 24. How do you think this company's safety record compares with that of other companies in the industry?
 25. Does the safety management policy clearly address the company's commitment to training in occupational health and safety?
 26. Who provides this training?
 27. Do you think that it is possible to separate occupational health and safety from top management's responsibility? If so how? If not why? And what effect would this have on occupational health and safety?
 28. What do you think are the weaknesses in this country's occupational health and safety legislation relating to your field of work?
 29. Do you think that the country's present occupational health and safety legislation has evolved compared to pre 1994?
 30. Is there anything else you would like to add at this stage of the interview that you feel is important?
 31. What do you think should be the goals of upper, middle and lower management and supervisors in relation to occupational health and safety?

34. What do you think should be the general responsibilities of management,
35. supervisors and employees?
36. What do you think of the current state of occupational health and safety in South Africa?
37. What role do you think unions should play in occupational health and safety in the workplace?
38. What role is the trade union currently playing in the company?
39. What do you think of the level of training in relation to occupational health and safety in South African companies?
40. What do you think are the weaknesses in this company's occupational health And safety implementation and how can they be challenged?
41. Do you agree that occupational health and safety legislation can be interpreted
42. broadly and that managers often take advantage of this?
43. Can you tell me about the company's compensation system?
44. What do you think are the common factors that are taken for granted that lead to risk taking by employees?
45. How are these employees reprimanded for risk taking in relation to occupational health and safety?
46. In conclusion, is there anything else that you would like to add?

INTERVIEW SCHEDULE: HUMAN RESOURCES OFFICER

1. Can you tell me about your role and your level of authority at this point in your career at DaimlerChrysler?
2. How do you evaluate the needs of the employees to ensure the effectiveness of the HIV/AIDS programme?
3. Can you tell me a bit more about your peer educator system?
4. How do you intend to promote and encourage behavioural change among the employees?

5. How do you develop the training programmes to encourage this behavioural or attitudinal change?
6. How do you find out what kind of education and information the employees seek in relation to HIV/AIDS?
7. Once an HIV/AIDS programme is in place, how often is it reviewed or adjusted to reflect the changing needs of the employees in the workplace?
8. Do you think that the trade union should be involved in the development of these programmes?
9. What are the core objectives of the service that you are offering?
10. How do you promote safety and health in the company regarding HIV/AIDS?
11. Can you tell me more about the services that you offer in relation to HIV/AIDS for the employees?
12. Who funds this project?
13. On finding out that one of your employees is HIV/AIDS positive, what are the immediate steps that you take?
14. How do you ensure the confidentiality of the employees?
15. Do you think that the programme has made a positive impact in the workplace?
16. Why do you think that some companies are not making HIV/AIDS a priority?
17. What are your views of the argument that HIV/AIDS should be incorporated more strongly into occupational health and safety because at the moment they are separate issues?
18. What do you think are the current weaknesses in the programme?
19. Could you tell me more about any future plans in the HIV/AIDS management system?
20. In conclusion, is there anything else that you would like to add that you feel is important?

INTERVIEW SCHEDULE: SAFETY SPECIALIST

1. Could you describe your safety and health responsibilities and your level of authority?
2. Can you tell me more specifically about how you involve your employees in occupational health and safety?
3. Do you feel that the training that you provide employees in this regard is adequate to ensure their safety in the workplace?
4. What do you think are the weaknesses in your system at the moment specifically relating to training?
5. Do you think that it is possible to separate health and safety from top management's responsibility?
6. There is an argument that the phrase 'reasonably practicable' be replaced by the phrase 'the best practicable means' in the context of OHSA? What do you think about that?
7. The law can be interpreted in many ways. Do you agree that management can interpret it in the manner they choose and get away with it fairly easy in South Africa?
8. If your health and safety policy is working effectively at this stage, as you have been mentioning, how do you foresee occupational health and safety in this company in five years time?
9. In conclusion, is there anything else that you would like to add that you feel will be pertinent to this research?

INTERVIEW SCHEDULE: STAFF COMMITTEE REPRESENTATIVES

1. What are the staff committee representatives objectives regarding occupational health and safety?
2. How do staff committee representatives participate in decision making Regarding occupational health and safety matters

3. What are the barriers preventing you from participating in occupational health and safety structures in the company?
4. What kind of communication structures are in place to deal with the challenges that you face?
5. How often does this kind of communication take place?
6. How do you prioritise occupational health and safety?
7. Do you agree that occupational health and safety is a priority?
8. Where is occupational health and safety currently on your priority list?
9. If wages and occupational health and safety are pressing needs at the same time, which one would you give precedence to?
10. How do you ensure that employers are well aware of their right to safe working conditions?
11. What are the barriers preventing you from participating in occupational health and safety matters?
12. What would you do to improve the current state of occupational health and safety in the company?
13. Is there anything else that you would like to add at this point that I have not asked that you feel is important?

INTERVIEW SCHEDULE: DIVISIONAL MANAGERS

1. Describe your safety responsibility?
2. What is your primary goal as divisional manager in relation to occupational health and safety and the environment?
3. How aware are you of your own duties and responsibilities regarding occupational health and safety?
4. In what ways do you participate in health, safety and or environmental activities?
5. Are safety rules regularly reviewed with your employees?
6. Do you feel that you have provided your employees with adequate information pertaining to occupational health, safety and the environment?

7. How do you get your employees involved in occupational health, safety and environmental matters?
8. What methods of communication do you specifically use with the employees in these instances?
9. Would you say that you take a reactive or a proactive stance to occupational health, safety and environmental matters?
10. Would you, as the divisional manager say that you have received adequate health and environmental training in order to pass it down to your employees?
11. What are the challenges that you face in creating an effective safety culture in the workplace?
12. What do you think should be done about these challenges?
13. How does your division's safety record, compare with other division's safety records?
14. How would you prioritise occupational health and safety when faced with more pressing and immediate problems?
15. Do you think that it is solely management's duty to ensure safe working conditions?
16. What are the barriers that you face in implementing training in relation to occupational health and safety?
17. In what ways do you think that management and employees should become involved in developing a training programme?
18. What role do you think that the trade union should play in occupational health and safety matters?
19. Do you think that having an HIV/AIDS policy in place together with an effective occupational health and safety management policy impacts on productivity? If so How?
20. Is there anything else that you would like to add that you feel is important that I have not asked you?

INTERVIEW SCHEDULE: TEAM MANAGERS

1. Could you describe your safety responsibility as a team manager?
2. What is your primary goal as a team manager in relation to occupational health and safety and the environment?
3. How aware are you of your own duties and responsibilities regarding
4. occupational health and safety?
5. In what other ways do you participate in occupational health, safety and environmental activities other than what you have already mentioned?
6. Are safety rules regularly reviewed with your employees?
7. Do you feel that you have provided your employees with adequate information regarding occupational health and safety?
8. How do you get your employees involved in occupational health, safety and environmental activities other than what you have already mentioned?
9. What methods of communication do you use with your employees?
10. How often does this communication take place?
11. Would you say that you take a reactive or a proactive stance to occupational health and safety?
12. Is the amount of occupational health and safety training provided to you adequate?
13. What are the challenges that you face as a team manager in creating an effective safety culture?
14. What stands in the way of you actually getting your message across?
15. What other solutions do you think could be in place to deal with these challenges?
16. How does your division's safety record compare with other divisions' safety records?
17. How do you prioritise occupational health and safety when you have more pressing and immediate issues to deal with?
18. What are the barriers that you face in implementing training in relation to occupational health and safety?

19. What is the benefit of you, as a team manager, having the level of knowledge and awareness in occupational health and safety that you do?
20. How concerned are you as a team manager about occupational health and safety training?
21. Who would identify the need for training?
22. Who establishes the objectives of this training?
23. Who evaluates the training?
24. Is there anything else that you would like to add, that you feel is important?

INTERVIEW SCHEDULE: EMPLOYEES

1. Do you know what the dangers are in your workplace?
2. What do you do when you come across an unsafe or an unhealthy condition in the workplace?
3. Is it your duty to report these unsafe conditions?
4. Are you only responsible for ensuring your own health and safety or that of your fellow employees?
5. Do you participate in the development of safe work practices?
6. How do you feel about unsafe working conditions?
7. Would you say that the conditions in which you are working now are safe?
8. Do you accept these conditions as just being part of your job?
9. How often is the equipment you work with inspected?
10. Do you share your safety concerns with your team manager?
11. Are accidents and injuries thoroughly investigated when they do occur?
12. Do you think that it is management's duty to ensure safe working conditions?
13. Do you have a regular opportunity to attend safety meetings?
14. Do you participate in inspections for potential hazards?
15. Do the company's safety rules protect you the employee?
16. Has your company's efforts encouraged you to work more safely?
17. Are you checked on a routine basis to see whether you are doing your jobs

- safely?
18. Have you ever been asked to perform an operation which you felt was unsafe?
 19. Are safety rules regularly reviewed with you?
 20. Are you interested in how your division's safety record compares with other divisions safety records?
 21. Do you caution your fellow employees about unsafe work practices?
 22. Are you provided with protective equipment?
 23. Must a copy of the Occupational Health and Safety Act be kept somewhere in the factory?
 24. If you were in a position to improve the occupational health and safety standard where you are working, what changes would you introduce?
 25. Do you undergo training regarding occupational health and safety?
 26. Do you feel that you have received adequate occupational health and safety training for the job that you are doing?
 27. Do you support this company's safety programme?
 28. In your opinion, how committed is management in relation to occupational health and safety?
 29. In your opinion, does your supervisor or team manager know what the dangers are in the workplace?
 30. Are you provided with the opportunity to become more involved in occupational health and safety decision making?
 31. What is your ultimate goal as an employee in relation to occupational health and safety?
 32. Is there anything else that you would like to add that you feel is important that I have not mentioned?

INTERVIEW SCHEDULE: MANUFACTURING DIVISIONAL MANAGER

1. What are your safety and health responsibilities as manufacturing divisional manager?

2. What are your goals and objectives in relation to occupational health and safety?
3. What specific methods of communication do you use to raise the employees awareness around occupational health and safety matters?
4. Could you tell me about your processes for identifying and correcting safety and health hazards?
5. Who are your information gatherers regarding occupational health and safety on the shop floor?
6. How do negotiations take place between management and the trade union regarding occupational health and safety and how often do they take place?
7. What role do you think the trade union should play in occupational health and safety matters?
8. Do you agree that there is a relationship between management style and labour productivity?
9. How do you prioritise occupational health and safety when there are more immediate and pressing problems to address?
10. How do you challenge unsafe working conditions?
11. Do you feel that you have provided the employees with adequate knowledge regarding occupational health and safety?
12. What are the barriers that you face in creating a safe work culture?
13. How are you going to work around these barriers?
14. What are the barriers that you face in implementing training in relation to occupational health and safety?
15. Do you feel that you are provided with adequate knowledge in relation to occupational health and safety?
16. What are the benefits of you as manufacturing divisional manager having this level of knowledge and awareness?
17. Is there anything else that you would like to add at this stage that you feel is important?

INTERVIEW SCHEDULE: MEDICAL DEPARTMENT

1. Could you tell me about the services that you offer?
2. How do you evaluate the needs of the employees and keep up with all the Changes (previous and current)?
3. What obstacles are you facing in your attempt to deliver this service?
4. Do you think that the services you are offering portray management's commitment to occupational health and safety or your medical staff team's to occupational health and safety?
5. Is there anything else that you would like to add that you feel is important that we have not mentioned?

INTERVIEW SCHEDULE: GROUP MEDICAL ADVISOR

1. How do you promote occupational health and safety in the company in general as the group medical advisor?
2. Can you tell me why HIV/AIDS is such a key factor of your programme?
3. How do you ensure the effectiveness of your programmes that you put in place?
4. What are the challenges that you are facing in implementing your programme and keeping it at the level of functioning that it is at?
5. What assurance do you have of the effectiveness of your programme?
6. How do you balance the benefits of your programme versus the cost?
7. Is there anything else that you feel is important that you would like to add?

INTERVIEW SCHEDULE: SAFETY, HEALTH AND ENVIRONMENT COMMITTEE CHAIRPERSON

1. What are your safety, health and environmental responsibilities and level of authority?

2. What are your primary goals and objectives in relation to occupational health and safety?
3. In what ways do you participate in safety, health and environmental activities?
4. Could you describe your process for evaluating and updating your occupational health and safety system?
5. Would you say then that you take a reactive or a proactive stance to occupational health and safety?
6. What are the challenges that you are facing in creating an effective safety culture in the workplace?
7. What do you think should be done about these challenges?
8. Could you describe your process for evaluating and updating your occupational health and safety system?
9. Would you say then that you take a reactive or a proactive stance to occupational health and safety?
10. What are the benefits of having the occupational health and safety structures that you have in place for the company and the employees?
11. Do you think that it is possible to separate occupational health and safety from top management's responsibility?
12. Is there anything else that you would like to add that you feel is important that we have not mentioned?

INTERVIEW SCHEDULE: BIOKINETISIST

1. Who is your programme specifically aimed at?
2. How would employees benefit from becoming more educated about their health?
3. What would you say is your key goal in relation to occupational health and safety?
4. What is the value of the service that you are offering?
5. How do you know that you are making a difference to occupational health and safety as a whole in the company?
6. What challenges are you facing?

7. What are the main concerns of employees that you encounter?
8. Why do you think these are the main concerns?
9. How do you think the services that you are offering will enhance occupational health and safety in the company?
10. What kind of information do you provide to employees on living healthy life-styles and how do you promote this?
11. How is your programme evaluated with the aim of keeping up with the changing demands of your workplace?
12. What methods of communication do you use with the employees on the shop floor?
13. Do you think that your programmes demonstrate the commitment of management to respond to the concerns of the employees in relation to their health?
14. Do you think that corporate wellness should be an essential part of a company's structure?
15. Is there anything else that you would like to add that you feel is important?

INTERVIEW SCHEDULE: TRADE UNION REPRESENTATIVES

1. What are the trade union's objectives regarding occupational health and safety?
2. How does the union participate in decisions regarding occupational health and safety?
3. How does the trade union assess the current level of awareness around occupational health and safety among employees?
4. How educated are the trade union representatives regarding occupational health and safety?
5. Does the trade union support the occupational health and safety programme of the company?
6. What role has the union played in re-evaluating or bringing about changes and improvements to occupational health and safety in the company?
7. How do you prioritise occupational health and safety when there are more pressing and immediate concerns?

8. Does the union feel that management is efficient in inspecting and regulating occupational health and safety standards?
9. In the opinion of the union, is occupational health and safety part of management's priority list?
10. Is it on the union's priority list at this particular time?
11. How do you ensure that employees are well aware of their right to safe working conditions?
12. How did the union and management draft the occupational health and safety management policy?
13. How do you think occupational health and safety should be monitored?
14. What challenges is the union facing in relation to occupational health and safety?
15. Is implementing the provisions of the occupational health and safety management policy successful?
16. What factors are undermining a successful implementation?
17. Do you have an HIV/AIDS workplace health promotion programme in place?
18. What is the programme composed of?
19. How is employee health promoted through the programme?
20. Does the union support this programme?
21. Do you think that the union should be part of the development of such a programme?
22. Why do you think that the union is part of the development of this programme?
23. What are the goals of this HIV/AIDS programme?
24. Can you tell me how the HIV/AIDS programme relates to occupational health and safety in general?
25. Have the results of your HIV/AIDS workplace health promotion programme had a positive impact on occupational health and safety in the company?
26. How does the union find out what the needs of the employees are to ensure the success of this programme?
27. How often is a needs assessment carried out to ensure the effectiveness of the HIV/AIDS programme?
28. Why is such a big emphasis placed on HIV/AIDS and how does the union feel about this kind of emphasis?

29. What support structures are in place for employees who are HIV/AIDS positive?
30. Can you tell me a bit more about the form of education and training provided to employees suffering from HIV/AIDS?
31. How do you think management benefits from creating this caring image for their employees?
32. Are there any challenges that you are facing in the implementation of this HIV/AIDS programme?
33. Is there anything else that you would like to mention that you feel is important that we have not spoken about?

INTERVIEW SCHEDULE: HUMAN RESOURCES GROUP DIVISIONAL MANAGER

1. Could you tell me in a nutshell about what your job entails?
2. What are the company's goals and objectives in relation to occupational health and safety in general?
3. What implementation stumbling blocks are you experiencing in relation to your occupational health and safety management policy?
4. Do management and employees adhere to the provisions of this policy?
5. In what ways do they adhere?
6. Where does occupational health and safety fit within your overall human resource policy?
7. How do you channel and communicate governmental changes in legislation down to the relevant people such as managers and employees in the company on the shopfloor?
8. What assurance do you have that this communication is taking place effectively?
9. What kind of feedback are you receiving regarding this?
10. What impact has non-compliance by employees and management made to (a) profits (b) productivity (c) loss?
11. What control measures are in place to overcome this?

12. Who takes responsibility for safety awareness programmes?
13. What criteria have been used to choose safety representatives?
14. What is the reason for choosing these criteria?
15. Is there anything else that you would like to add that you feel is important that we have not mentioned?

APPENDIX B

DAIMLERCHRYSLER SOUTH AFRICA (PTY) LTD SAFETY, HEALTH AND ENVIRONMENTAL MANAGEMENT POLICY

DaimlerChrysler South Africa (Pty) Ltd fully commits itself to integrating safety, health and the environmental management into the manufacturing and other company processes. We thereby are fully committed to the environmental protection guidelines of the DaimlerChrysler group. These guidelines are binding for all DaimlerChrysler employees and facilities world wide and form our environmental policy. On the basis of the environmental protection guidelines and to ensure the continuous improvement process, each division within DaimlerChrysler South Africa (Pty) Ltd will define and implement additional specific environmental objectives and targets.

MANAGEMENT INVOLVEMENT

DaimlerChrysler South Africa (Pty) Ltd, management undertakes to regard the safety and health of all its employees and environmental responsibility of fundamental importance. This requires that the safety, health and the environmental function be completely integrated into management practices and principals that will form part of the daily activities and responsibilities of management.

PERSONNEL INVOLVEMENT

All employees who work within DaimlerChrysler South Africa (Pty) Ltd must regard their own safety and health and that of their colleagues as a high priority and must ensure that they comply with legislation and company safety, health and environmental policies,

procedures, rules and regulations. We recognise that meaningful employee involvement and commitment is a pre-requisite to ensure a successful programme.

RESPONSIBLE PRODUCTION

We undertake to provide safe machinery, material and methods in order to facilitate a safe and healthy working environment.

SAFETY, HEALTH AND ENVIRONMENTAL TRAINING

Training is given to all levels to enable and encourage employees to work safely and to be more environmentally conscious. Safety and health, and also efficiency, is not only a goal, but also a demand for the mutual prosperity of DaimlerChrysler South Africa (Pty) Ltd and shall be strived for by all employees.

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