

A COMPARATIVE STUDY OF HEALTH AND SAFETY PROVISIONS AND THEIR IMPACTS ON PROFIT AND NON-PROFIT ORGANISATIONS

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ABSTRACT

Purpose: This paper attempts to compare and identify impact of health and safety provisions and how they are perceived among profit and non-profit organisations.

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Design/methodology/approach: The research is based on secondary research, heavily depending on printed (e.g. books, journals) and online resources (e.g. journals, websites) available on the policies and information available on the key areas of the research topics.

Findings: Though different business entity operates in different set norms and values, in relation to health and safety policy and procedures none has any flexibility.

Originality/value: Emphasising the importance of health and safety provisions for both profit and non-profit organisations.

Keywords: health and safety; social enterprises; risks; profit and non-profit organisation.

INTRODUCTION: SOCIAL ENTERPRISES (NON-PROFIT ORGANISATIONS)

The concept of social entrepreneurship is not clearly defined. It is rather unclear, which leads to contest among practitioners and academics in finding a common ground of understanding. The extraordinary impact of social entrepreneurship is profoundly influenced by this lack of clarity over the meaning of the concept, mainly due to the dynamic flexibility of social entrepreneurship or entrepreneurs (Nicholls, 2008).

To investigate and identify the meaning and understand the concept of social entrepreneurship, it is important to know that business are/can be of two kinds:

- 1 business to earn income and
- 2 business to benefit others

Furthermore, any young entrepreneur has the privilege of choice to decide which kind of entrepreneur they would like to be (Yunus, 2006).

In clarifying the concept of social entrepreneurship (Nicholls, 2008) mentions social entrepreneurs and their networks' unrelenting focus on systematic social changes and that the process of this social change may disregard or compromise with organisational and institutional norms and boundaries. Most of the process of this social change or change agent does not operate in a typical or conventional business setup: rather, it operates in a more diverse and strategic landscape.

Achieving the objectives of social change is not always simple and there is no best way to achieve the objectives. Some social entrepreneurs would use money to influence the social change, whereas some would invest their labour, time, skills, talent and other contributions that are useful or beneficial to others. However, it is important to realise and understand that those who are using or investing money to influence the social change may or may not recover part or all of the money they have invested for the change through charging a fee or a price (Yunus, 2006).

Discussions on social entrepreneurship give us an indication that social entrepreneurs may not follow the structure of the conventional business setups and may disregard or compromise

with organisational and institutional norms and boundaries of the conventional business setup (Nicholls, 2008). This influenced the authors of the current paper to investigate how 'Health and Safety' provisions impact on and are practiced by profit and non-profit (social enterprises) organisations.

HEALTH AND SAFETY PROVISIONS

According to Armstrong (2001, p.819)

"health and safety policies and programs are concerned with protecting employees and other people affected by what the company produces and does – against the hazard arising from their links with the company."

Literature also specifies that health and safety idea is a mixture of principles, approaches and a set of practices. Whereas, Bratton and Gold (2007) states

"health and safety management is concerned with the design and maintenance of a work environment that supports the organization's objectives, creates a safe and healthy workplace and promotes the well-being of employees."

The health and safety regulations (Health and Safety at Work Act 1974) identify risks related with every business, estimating the hazards and dealing with them. The purpose of this act is to protect consumers and employees in the same way. Within Marriott hotel, a safe work place provided by ensuring that proper equipment is available for the staff. The safety of the guests is ensured by employing more competent staff and ensuring a safe environment. Health and safety terms refer to a set of rules and procedures, proposed in order to identify work place hazards or, in the public environment, to protect people from illnesses or to reduce different accidents.

"Employers have a general duty of care at common law to ensure that work activities undertaken by employees are safe and without risks to health, and that employees are adequately trained to undertake the work" (Strands, 2010, p.41).

The health and safety policies are required for every organisation to show that the management is concerned with the employees' and customers' safety. This is essential to achieve the highest level of health and safety in Marriott. Due to employee's absences or different accidents, the hotel can lose many guests and the profit of the business will be affected.

The health and safety manager carries out a risk assessment regularly and implements a range of measures to prevent and control all hazards.

In the Marriot hotel, the policy on health and safety focuses on the following main points:

- safety of employees and guests
- an intense involvement of managers, employees and team leaders to implement a strong health and safety procedures
- completing the health and safety rules in accordance with the law.

As an important part of preventing accidents, health and safety trainings take place regularly in the Marriott hotel.

In general, there is restricted research existing on the motivation for healthy and safe behaviour in the workplace and the literature on health and safety segmentation is concentrated on the company, rather than on the general community or employees.

The segmentation of the health and safety marketplace is influenced by the framework in which the segments function. This framework could be internal – for example, the company as a whole, or external – for example, the impact of competitors. There is a strong relation between these frameworks and the intent and ability to develop a healthy and safety work environment.

In the Figure 1 two important components of the health and safety culture are shown:

- 1 The intent, with two sub-components: knowledge (it is the understanding of the significance of health and safety in workplace) and motivation (the need to implement this knowledge).
- 2 The ability with competence (the capacity to implement practices in an efficient way) and practice (what should to happen to improve workplace health and safety).

STANDARD PRACTICES FOR HEALTH AND SAFETY

In order to comply with the health and safety legislation every organisation has to follow a range of standard practices, such as (Health Working Lives, 2014):



Source: Dol.govt (2015).

Figure 1 Diagram of market segmentation

- Writing a health and safety policy, where ways to put these policies in practice should be stated.
- A risk assessment that is an examination of what could cause injury and who might be affected.
- An insurance certificate that the company has obtained and which it should display.
- Employers must inform all staff about health and safety legislation; displaying health and safety posters through out organisation.
- All details for every accident or minor injury have to be noted in an accident book (that it was introduced in 2003 to be in accordance with Data Protection Act 1998).

MODELS OF HEALTH AND SAFETY

The essential aims for every organisation are to maintain healthy and safe management of employees and customers. To sustain the health and safety system within the organisation, a range of models were adopted. In the figures below, two types of models are presented.

Corning's model of health and safety: is built on four important phases that every company should follow, stages such as: planning; doing; checking and acting.

The figure below explains these phases in detail.

- Each organisation has to set up its policy with its own objectives by using a standard Safety and Health Policy.
- In the next stage, it needs to establish different management practices, (a plan with responsibilities) in accordance with individual needs and the requirements of the company.



Source: Corning (2015).

Figure 2 Health and safety model

- Every policy established, there should be an evaluation of hazard and proper measures of control.
- To be sure that the health and safety system is efficient and to ensure improvement, continuous evaluation should be imposed.

The figure below shows another model of health and safety – *Comprehensive Work environment Health Model*, including four elements: organisational culture, health practices, occupational health and safety and social responsibilities. In order to implement the process, this model follow these steps: planning, doing (the program), checking (by evaluating and presenting the actions undertaken) and the last step – acting through a constant review of this program (Owhc, 2014).

The occupational health and safety element is related to minimising work injury by monitoring all risks during the work process. These risks could be linked to: response to emergency situations; quality of air in the physical environment; illness anticipation; control of noise; ergonomics aspect; using correct equipment.

The next element – health and lifestyle practices – embodies a healthy personal lifestyle such as: a healthy eating, reducing stress or promoting physical activity.

Organisational culture focuses on psychosocial aspects in the work environment, on relations between people: leadership, beliefs, involvement.

Social responsibilities lead to improvements in the health of workers or their family by raising funds for the local charities or bringing opportunities to be volunteer during their job (Owhc, 2014).



Source: Owhc(2014).

Figure 3 A comprehensive workplace health model

Both models present the important steps that need to be followed by every company to maintain a secure environment for its customers and employees.

HEALTH AND SAFETY PRACTICE AT MARRIOTT

As leader in the hospitality field, Marriott struggles to protect the health, safety and individual security of all guests and workers. By providing healthy and safe practices, the hotel will deliver excellent customer service.

An online system STA (Safety Qualified) was recently introduced to allow managers to carry out the safety review online to sustain the organisations health and safety actions (Sta, 2013).

A range of health and safety practices are enforced in Marriott in order to avoid further law issues. These practices are shown below:

- a health and safety policy written by the employer
- keeping records of any work accident
- carry out risk assessments of all work activities
- maintain a health and safety training program
- fostering a close relationship between workers and their health and safety representatives
- existence of employer's liability insurance and
- existence of health and safety posters.

To meet all health and safety requirements, some practical activities undertaken in Marriott are further exemplified (Mgrw, 2015):

- If the staff works for a long time with the computer, they will take regular breaks.
- The electrical system and fire extinguishers for the entire hotel is always checked properly.
- The training on first aid and fire prevention is continuously updated.

Although the hotel management is trying to comply with all legal health and safety procedures, accidents happen. Here are two examples:

- In September 2010, the Marriott Hotel from Norwich was prosecuted due to an accident, when a chef slipped on the kitchen floor and burnt his hand in a fryer (he did not wear non-slip shoes). Therefore the hotel was fined with £20,000 (Punting, 2012).
- Another penalty was imposed for Marriott Hotel Bristol, when a contractor came to conduct a survey, fell down around 2.5 m through a hatch. The health and safety officers found that Marriott did not have a special risk assessment related to hatches (Punting, 2010).

To ensure that all workplace hazards are identified and rigorously controlled, a comprehensive Safety Management System is operated within Marriott hotel. Marriott also runs another program –Stop, Think, Act, Report (STAR) by which any unsafe equipment and operations are reported.

THEORIES THAT EXPLAIN HEALTH AND SAFETY CONCEPT

Heinrich's theories

- Theories Heinrich's Loss Control Triangle

The first approach regarding accident/prevention was undertaken by William Herbert Heinrich, an employee that worked for Travelers Insurance Company, in 1932.

The main idea of Heinrich's theory refers to the following aspects:

- There is a mathematical link between the numbers of accidents of the same types and their rigorousness.
- Unsafe acts of employees are the basis for most of workplace accidents.
- Decreasing the general frequency of workplace harms will lead to a reduction in the number of severe injuries.

By collecting and analysing data, Heinrich suggested that for every main injury there are 29 insignificant injuries and 300 no-injury accidents. This model is most used by promoters of Behaviour Based Safety (BBS) programs which are often called Heinrich's Triangle (another name is Bird's Triangle, after Frank Bird who reviewed Heinrich's taxonomies in 1969).



The Heinrich 300-29-1 Model

Source: The safety bloke(2012).

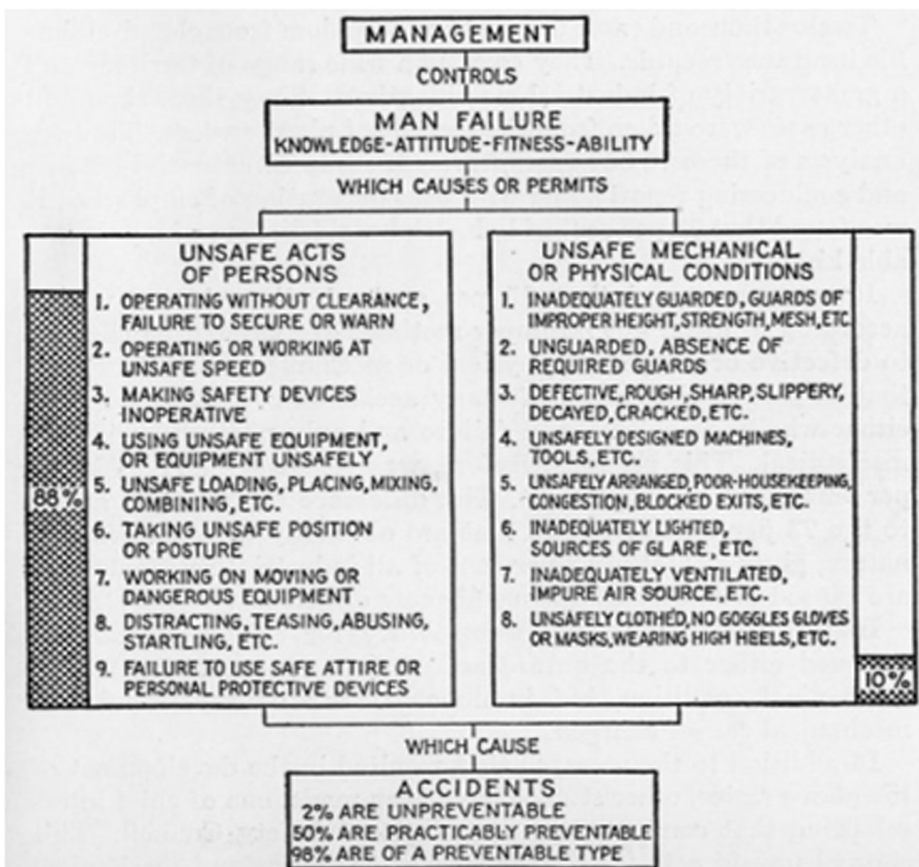
Figure 4 Heinrich's Loss Control Triangle

Heinrich's severity taxonomy was not the same as what is commonly regarded today as the classification of injuries. He considered that a major injury as one that needed a claim to be made with a worker's benefit insurer or reported to a state official, regardless of the extent of the injury. Also, a minor injury was measured as needing first aid.

After revising Heinrich's theory, Bird indicated that this classification would be dissimilar for every workplace and period.

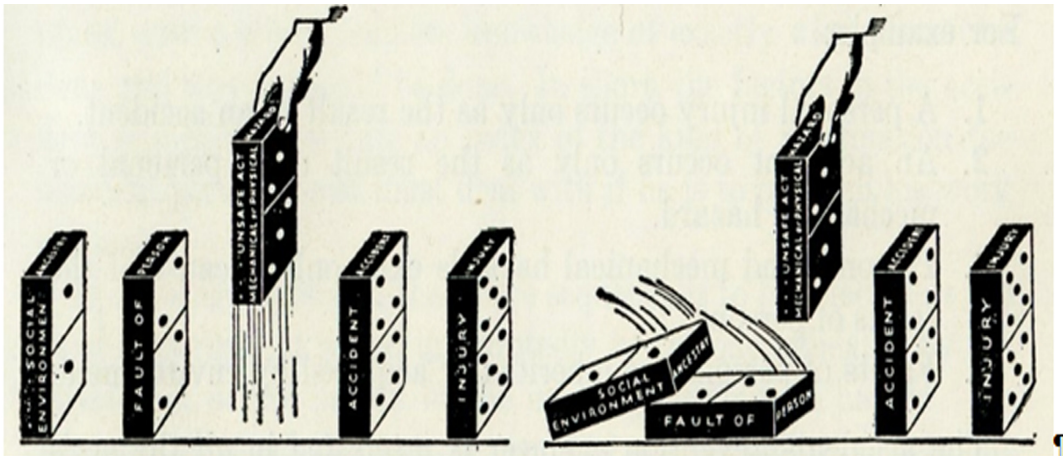
- The Domino's theory of Heinrich, with regard to Accident Causation and Preventions is the most important theory on health and safety at work.

According to this theory Heinrich stated that around 88% accidents in the workplace were produced through unsafe actions (the most common being by the injured individual) and 10% of accidents were the consequence of insecure equipment or environment and the remaining 2% were unavoidable. He debated that harm resulted from accidents; accidents from risky actions which in turn arise from the mistakes of people that had their



Source: The safety bloke (2012).

Figure 5 Heinrich's Theories: Accident Causation and Prevention



Source: The safety bloke (2012).

Figure 6 The Heinrich's Theories: Domino aspect

source in the social environment. Heinrich considered that all injuries could be avoided by preventing accidents from happening. He focused on prevention planning, while the BBS program has shown that changing the comportment of workers is basic to reducing the severity and the number of work environment accidents (The safety bloke, 2012).

Human Factors Theory: This theory explains that human mistakes can be the source for many work accidents. These mistakes could be classified as: overload – when the job is beyond the competence of the workers; incorrect workers response – workers or management's errors or improper activities – deficiency of training.

Accident/Incident theory: adds a few elements to the Human Factors Theory such as: unsuitable works tools, personal or management breakdown (Academic.csuohio.edu, 2014).

Maslow's Hierarchy of Needs – is a pyramid with five levels that shows people have needs ranging from basic needs (physiological, safety, belongingness) to higher needs (esteem and self-actualisation).

According to Maslow's theory, in business, employers need to be aware that a safe and protected work place decreases physical injuries. Workers are more comfortable and perform their task in good conditions, when the level of risk is reduced, and a proper health and safety actions are strictly imposed and supervised by management. They feel more comfortable and are less distracted from performing their tasks and interacting with others. Also, safety actions may reduce the absenteeism and security leads to well-being in work environment.



Source: Learning - Theories(2014).

Figure 7 Maslow's Pyramid of Needs

CRITICISM ASPECTS ON HEALTH AND SAFETY THEORIES

A statistician, William Edward Deming, considered that the majority of problems in work places occur due to the system or management, not because of employees as in Heinrich's theory (Safety and health magazine, 2011).

James Howe, who was head at Safety Solution in Medford, outlined criticisms of Heinrich's accident triangle. He said that assigning 88% of accidents to unsafe actions does not take into account that these accidents regularly have several causal factors (Safety and health magazine, 2011).

Taubate, a safety manager for General Motors, pointed out, in 1980, that Heinrich's study lead people to look especially at measures and training instead of reconsidering the system design. In his point of view, the design may contribute to unsafe acts and Heinrich's ideas were suitable at the time but currently inapplicable (Safety and health magazine, 2011).

Another criticism comes from Lo Maestro's ideas that said that most accidents are result from reduced training or inappropriate tools, while Heinrich attributed work accidents to workers' behaviour. Lo Maestro considers that the management has an important role and the capacity to prevent accidents and it needs to undertake the responsibilities (Safety and health magazine, 2011).

COMPARISON OF MARRIOTT'S HEALTH AND SAFETY IN USA, EU AND UK

The UK and EU procedure regarding health and safety within Marriott are not very different. The EU's controlling approach is usually described in terms of the preventative values while in the UK is focused on controlling and evaluating the impact and it leans towards restraint.

The range of American and European regulatory policies are not the same because the policy of consumer protection is more important in UK than in USA. However, according to Bratton and Gold (2007) the

“interest in wellness management has increased rapidly in the USA at the time when the regulatory power of the official health and safety agency, the Occupational Safety and Health Administration, has allegedly been curtailed under the Clinton and Bush junior administration.”

The same aspects are seen in USA and UK, where the essential responsibilities on health and safety in hotels is to keep managers aware of all issues regarding safety and security. In some countries of EU, many directors of hotels do not have a continuous understanding of their duties.

HEALTH AND SAFETY PROVISIONS ON SOCIAL ENTERPRISES

Unlike Marriot, which is a for-profit organisation, in this section, the authors will look into the impact of health and safety provisions on non-profit (social enterprise) organisations. There are presumptions suggesting that social enterprises ought to be non-profit or not-for-profit organisations, which means the organisation does not distribute its surplus or profits to individuals (NESA, 2015). However, there are debates on this concept as to whether social enterprises can be for profit or should be strictly not for profit. Yunus (2006) suggested that young entrepreneurs will have much a wider choice in mixing the profit and non-profit concepts for their personal objectives, if the interpretation of capitalism is broadened further. None the less, NESA (2015) suggests all profits made by non-profit organisations should be put back into the business, or reinvested into the local community. Furthermore, non-profit organisations should obey the health and safety provisions as regular for-profit organisations, though idea of social entrepreneurship allows non-profit organisations to disregard or compromise with organisational and institutional norms and boundaries of the conventional business setup (Nicholls, 2008).

According to North Somerset Enterprise Agency (NSEA, 2015) there are many pieces of legislation relating to health and safety, and all businesses (both profit and non-profit),—no matter what their size,—must be aware of their obligations in this regard:

- Employers are required to make sure that staff operate in a safe working environment. This duty also extends to visitors to the workplace, such as customers and suppliers.
- All businesses are required to regularly carry out a health and safety risk assessment regardless of their size and whether they employ staff.
- Organisations are required to carry out fire risk assessments and must take reasonable steps to reduce the risk from fire and to make sure that people can escape safely if there is a fire.

CONCLUSION

This paper has looked into health and safety provisions, their impact and how they are perceived by profit (Marriott's) and non-profit organisations. Though operational strategies, expectations, directions and most importantly norms and boundaries can be significantly different between profit and non-profit organisations, this paper identifies areas among them which are considerably similar. In relation to that, authors identify that health and safety provisions, their impacts and perception of the provisions are the areas where both entities can be said to be similar.

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BIOGRAPHICAL NOTES

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