Handbook for
Joint Safety and Health Committees
in the English-Speaking Caribbean

Karl Kjaer, ILO Consultant on Occupational Safety and Health, 1997
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Apart from the knowledge about the prevailing conditions and the experience acquired through field work in the various countries in the Caribbean, inspiration for the preparation of this Handbook has been sought and found in a number of ILO publications, especially the ILO Encyclopaedia of Occupational Safety and Health and various manuals published by the ILO Bureau for Workers' Activities.

Occupational safety and health laws and regulations from a vast amount of countries have been consulted. Particular attention has been given to the present and drafted legal instruments in the countries in the English-speaking Caribbean.

Thanks are due to the Barbados Workers' Union and the Barbados Workers' Union Labour College for their valuable contributions.

Special thanks are extended to the participants in the Workshop established to field test the draft material for this Handbook. This Workshop took place at the Barbados Workers' Union Labour College in December 1996 and was attended by experienced joint safety and health committee members drawn from a cross-section to the public and private sectors in Barbados and an official from the Labour Department.

Finally, gratitude is owed to the Director a.i. and staff of the ILO Caribbean Office for affording me the opportunity to write this Handbook and for the guidance and assistance so generously provided.

Karl C. Kjaer
Consultant on Occupational Safety and Health
Foreword

Every worker has a right to enjoy good health. This is a right which is enshrined in the corpus of law of all modern democratic societies. Complementing this, a provision is found on the lawbooks of most countries in the world - including practically all Caribbean countries - whereby owners and operators of industries have the legal and moral obligation to ensure that the workplace is safe, sound and secure. In the English-speaking Caribbean, the said provision can be found in the dominant legislative framework regulating occupational safety and health. This framework is still based on the British Colonial Factories Act from the late 1940's. Recognition by the social partners in a number of the States has, however, been given to the need to update their respective national legislation and a number of requests for support for the drafting of new and updated legislation have been met by the ILO Caribbean Office. The drafts all introduce the Joint Safety and Health Committees at the workplace level as a part of the Joint Responsibility System as described in ILO Convention 155 on Occupational Safety and Health.

In countries where new legislation has not yet have been drafted and/or enacted, some workplaces have begun to establish Joint Safety and Health Committees through the transfer of enterprise policies and modern practices on industrial relations from countries outside the region, primarily the United States and Great Britain.

Consequently, the concept of "Joint Responsibility" is relatively new and unknown to the Region generally and to the workplaces specifically. Many workplaces throughout the Region have encountered difficulties when attempting to implement the concept institutionalised in the form of a Joint Safety and Health Committee. Added to this is the fact that Trade Unions have a relatively low coverage of the private sector, and not much advice has been available from the majority of the respective Ministries of Labour which are also not very familiar with the Joint Responsibility System.

As illustrated above, the social partners at the workplace level in the region are actively searching for guidelines on the implementation of the Joint Responsibility System at the workplace level. It is the objective of this Handbook to provide some of these guidelines in a form that takes the specifics of the Caribbean into account.

In tune with the theme of this Handbook - the Joint Responsibility System emphasising the word "joint" - it is the intention that the Handbook can be used as reference material by the social partners - especially at the workplace level. The Handbook thus offers a carefully selected collection of background information (part one) and a vast amount of unbiased practical guidelines (part two) that can be used by present or potential joint safety and health committees in their daily work or as reference when needed. The Handbook provides a number of examples which are included to offer guidance to the user, and are intended only as models which can be re-drafted, modified and amended to meet the particular need of a given organisation.
Background

Every trade and every discipline has its own meaning of certain words and phrases. In the vocabulary of occupational safety and health the word 'worker' has a very broad meaning. Rather than the traditional understanding of a 'worker' as the shop-floor employee, 'worker' in our context covers all persons engaged in gainful employment at a workplace. The distinction between 'managerial' and 'non-managerial' worker is constituted by the functions of the respective worker and his or her place in the organisational hierarchy. 'Employer' in our context should be regarded as the owner of a workplace or his or her immediate representative (e.g. in the form of an executive managing director).

ILO Convention: An international labour standard developed through the ILO tripartite system. ILO Conventions are comparable to multilateral international treaties - they are open to ratification by member States and, once ratified, create specific binding obligations. A member State that has ratified a Convention is expected to apply its provisions by legislation or other appropriate means as indicated in the text of the Convention. The government of the member States is required to report regularly on the application of ratified Conventions and complaints about alleged non-compliance may be made by the governments of other ratifying States or by employers' or workers' organisations. Conventions that have not been ratified have the same value as ILO Recommendations.

ILO Recommendation: This instrument is intended to offer guideline(s) for action by member States. Often, a particular Recommendation will elaborate upon the provisions of a Convention on the same subject. Member States have certain important procedural obligations in respect of Recommendations - namely to submit the texts to their legislative bodies and to report occasionally, at the request of the ILO Governing Body, on the measures taken or envisaged to give effect to the provisions. Recommendations have no legal obligations.

The following countries in the English-speaking Caribbean are member States of the ILO: Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, St. Kitts and Nevis, Saint. Lucia, St. Vincent and the Grenadines, Suriname and Trinidad and Tobago.

Occupational safety and health is a relatively new issue in the industrial relations scenario and new issues merit new approaches. It is believed that "safety is everybody's business" and thus occupational safety and health at the workplace level lends itself to a collaborative, consensual approach as offered by the Joint Responsibility System rather than the traditional confrontational approach far too often practised. The success of the Joint Responsibility System depends on the players' ability and willingness to abandon their traditional modus operandi, forget about their traditional roles and adopt the practice of regarding themselves and each other as equal partners with equal rights and mutual interests. The productivity of enterprises and workers' welfare depend on this success.

The concept of joint responsibility is described in its totality in ILO Occupational Safety and Health Convention No. 155 and the Occupational Safety and Health Recommendation # 164, both adopted unanimously by the forum of government, employer and worker representatives from the member countries of the ILO gathered at the International Labour Conference in 1981. In spite of the fact that all delegates supported both the Convention and the Recommendation and in spite of the span of years that has elapsed since 1981, at the time of publication, none of the ILO-member countries in the Caribbean has ratified these international standards. It deserves mentioning, however, that even in situations with non-ratification of a Convention, the provisions contained therein still stand as internationally recognised and recommended standards.
As indicated above, Convention 155 and Recommendation 164 deal with the joint responsibility concept in its totality. The three main sections of the Convention establish guidelines on "Principles of National Policy", "Action at the National Level", and "Action at the Level of the Undertaking". The latter section is of prime relevance for the scope of this Handbook, but it deserves mentioning that the concept has a holistic approach requiring involvement and action on all levels of the society starting with the formulation of a National Policy. It should further be emphasised that all action to be taken according to the concept has to be done in consultation and cooperation with the three social partners involved: employers, workers and government. At this time, it is worth noting that previous approaches predominantly were of a "top-down" nature, providing few significant improvements at the workplace level, - and quite often even sparked a negative "bottom-up" reaction. The joint responsibility system offers a combination of the two with the emphasis on the "bottom-up" approach in the form of workplace involvement in all stages of the process. The success of this approach measured in the form of a decline in the number of workplace accidents and an increase in productivity is unequivocal.

While the full text of the two instruments can be found in Appendix 1, let us now turn to the application of the Joint Responsibility System at the workplace level. The provision for the establishment of the Joint Responsibility System at the level of the undertaking is outlined in Article 20 of the Convention: "Cooperation between management and workers and/or their representatives within the undertaking shall be an essential element of organisational and other measures taken in pursuance of Articles 16 to 19 of this Convention" (Articles 16 to 19 spell out safety and health measures and arrangements to be put in place by the employer). Note the pretty strong formulation used in the Article quoted above: "... shall be an essential element ...". In furtherance of this strong encouragement to all undertakings to establish joint safety and health committees Article 21 of the Convention determines that the expenses related to the work of the joint safety and health committee shall be underwritten by the employer: "Occupational safety and health measures shall not involve any expenditure for the workers". This indicates, inter alia, that workers appointed by their peers to the workplace safety and health committee should be given time off with normal pay to carry out the duties, e.g. to prepare for and participate in meetings and undertake assignments for the committee, etc.

Sections 12 and 13 of Recommendation 164 outline in detail what is expected from the level of the undertaking with respect to facilitating the cooperation referred to in the Convention:

"12."
(1) The measures taken to facilitate the cooperation referred to in Article 20 of the convention should include, where appropriate and necessary, the appointment, in accordance with national practice, of workers' safety delegates, of workers' safety and health committees, and/or joint safety and health committees; in joint safety and health committees workers should have at least equal representation with employers' representatives.
(2) Workers' safety delegates, workers' safety and health committees, and joint safety and health committees, or, as appropriate, other workers' representatives should:

- be given adequate information on safety and health matters, enabled to examine factors affecting safety and health, and encouraged to propose measures on the subject;
- be consulted when major new safety and health measures are envisaged and before they are carried out, and seek to obtain the support of the workers for such measures;
- be consulted in planning alterations of work processes, work content or organisation of work, which may have safety or health implications for the workers;
- be given protection from dismissal and other measures prejudicial to them while exercising their functions in the field of occupational safety and health as workers' representatives or as members of safety and health committees;
- be able to contribute to the decision-making process at the level of the undertaking regarding matters of safety and health;
have access to all parts of the workplace and be able to communicate with the workers on safety and health matters during working hours at the workplace;

be free to contact labour inspectors;

be able to contribute to negotiations in the undertaking on occupational safety and health matters;

have reasonable time during paid working hours to exercise their safety and health functions and to receive training related to these functions;

have recourse to specialists to advise on particular safety and health problems.

"13".

As necessary in regard to the activities of the undertaking and practicable in regard to size, provisions should be made for:

• the availability of an occupational health service and a safety service within the undertaking, jointly with other undertakings, or under arrangements with an outside body;

• recourse to specialists to advise on particular occupational safety or health problems or supervise the application of measures to meet them.

To put it succinctly, applying the Joint Responsibility System means living up to the saying referred to earlier: “Safety is everybody’s business”; at the national level, with the involvement of at least the employers, the trade unions and the government in a national advisory body on occupational safety and health issues; at the enterprise level, with the active equal involvement of workers with managerial responsibilities as well as workers assigned to other tasks. This cooperation is most commonly institutionalised in a workplace joint safety and health committee. Once the System is established, it can be put to the test by asking the following five questions: In relation to issues concerning occupational safety and health, do all workers at all levels have:

1) the right to know?
2) the right to participate?
3) the right to deny hazardous work?
4) the right to be free of reprisals? and
5) are those rights exercised?

This Handbook will offer some advice on how to establish the Joint Responsibility System at the workplace level and on how to apply the system to the normal day-to-day situation.

In closing this introductory section, mention should be made of the statement of Mr. Bob Sass, former Director of the Occupational Safety and Health Branch in Saskatchewan, Canada, who in a recent interview emphasised the prime importance of the group experience for progress in safety and health:

“The fundamental way of knowing about one’s work environment is communal, in conversation with other workers. Knowing and learning in the workplace is a communal act. The effective working of our [joint] health and safety committees requires many eyes and ears, many observations and experiences; and a continual cycle of discussion, disagreement and consensus about what has been seen and felt, such as nausea, dizziness, headaches, menstrual problems, irritations of all sorts and what this all means. The scientific method and experts can explain a great deal about the physical pollutants in the workplace, but not the meaning of things. Workers are the best instruments for experiencing their work environment, and only they can judge the meaning of their experience”.

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OSH Legislation in the Caribbean

Legislation on occupational safety and health in many countries around the world makes provision for the establishment of the Joint Responsibility System as it is outlined in ILO Convention on Occupational Safety and Health No. 155 from 1981. While it is appreciated that the laws merely provide a framework for the social partners to fill them out and actualise the intentions, the absence of the guidance, advice, and inspiration inherent in a piece of national legislation often results in passivity and complacency.

The purpose of this section is to provide a thorough comparative analysis of the legislation on occupational safety and health in the Caribbean and to offer some background on the current and draft Caribbean OSH-legislation with specific relation to provisions for the establishment of the Joint Responsibility System generally and within that context, on the concept of workplace joint safety and health committees in particular.

Occupational safety and health legislation made its appearance in the Caribbean in the early 1940s, on the basis of a recommendation of the Moyne Commission which, following the disturbances of the second half of the 1930s, investigated the social and economic conditions of the people. The provisions were embodied in Factories Ordinances or Factories Laws, and in the main had as their reference source, the old British Factories Act. On the attainment of independence “Ordinances” and “Laws” were retitled “Acts” so that presently we speak of Factories Act, or its equivalent, in reference to safety and health legislation. Although the statutory provisions tended to be similar, there was a difference between them. In most cases the statutes themselves embodied most of the safety and health standards leaving a relatively small portion to be put in subsidiary legislation called Regulations. In other cases, the statute took the form of an enabling law, in which event all or nearly all the standards were reserved for Regulations. The Factories Act (1949) of Trinidad and Tobago is an example of the first, that of Jamaica (1943) is an example of the latter.

Where the safety and health standards are largely set out in the statute, enforcement can begin, albeit on a more or less limited scale. Where all or nearly all the standards are left to Regulations, however, enforcement cannot begin until the Regulations are made, and these are not always made simultaneously with the enactment of the enabling law. In these circumstances, the date of the enactment of the law and the date on which it comes into force could be widely separated. But a more fundamental issue is involved in the adoption of one or the other of these methods. A statute is much more difficult and time consuming to amend than Regulations. It seems then, that where conditions permit the making of the Regulations at the same time that the statute is being enacted, the preference will be for an enabling law, and that where such favourable conditions do not exist, the choice will be to have a statute which itself embodies a significant amount of the standards. The Health and Safety at Work Act (1982) of Bermuda is an enabling law and is accompanied by several regulations setting out standards. On the other hand, the Factories Act (1984) of Barbados contains standards in a substantial number of areas. Both Acts are in force, although, in the case of Barbados, a significant number of regulations remain to be made.

Another feature which is common to the safety and health legislation in the Region is that a great number of the laws are outdated and obsolete and are in an urgent need of revision, to be brought more in line with international standards. For example, the latest significant amendment to the Jamaica Factories Act was effected in 1968. The Guyana Factories Act was last amended in 1977. The St. Kitts and Nevis Factories Act (1955) has never been amended. Further, Antigua and Barbuda (1975), The British Virgin Islands (1975) and Montserrat (1979) all have very minimal statutory safety and health provisions. Finally, it should be mentioned that in a few of the countries there is no occupational safety and health legislation at all. These are Anguilla, Bahamas, Cayman Islands and Turks and Caicos Islands.
Within recent times, four of the countries have sought to revise and bring their then existing occupational safety and health legislation up-to-date. These are Bermuda (1982), Barbados (1984), Dominica (1985) and St. Lucia (1985). In all cases, with the exception of Bermuda, some standards are included in the statute and others left to be put in Regulations. In spite of the length of time that has elapsed since the respective laws have come into effect, the required Regulations have not yet been made. In the case of Barbados, however, a new Act including a vast amount of regulations has been drafted by the Labour Department and is presently distributed to the social partners for comments.

For approximately fifteen years Trinidad and Tobago has been struggling to update its Factories Act, but so far without success. A Bill was actually laid on the Table in the last Parliament but the House was prorogued before it could be debated. The Bill has since been redrafted through consultations in a multipartite committee and is once again (late 1996) out for comments by the social partners.

Recently, Jamaica and Guyana have sought and obtained assistance from the ILO to draft a new and comprehensive Occupational Safety and Health Act which would live up to international standards including the joint responsibility system as one of the key elements. While apparently not much national follow up has taken place in Jamaica, the Guyana Draft has gone through two national multipartite consultations and has been distributed to the social partners for comments. The draft is presently at the Attorney General’s Chambers and the Minister of Labour expects to table the Bill in Parliament in March 1997.

Implementation of the Joint Responsibility System at the workplace level is highly essential if the spirit and not just the letter of the law is to be implemented. It is only within the last ten years or so that the concept of cooperation began to appear in the legal texts dealing with safety and health matters in the working environment. Consequently, the old Factories Acts make no provision for the formation of workplace joint safety and health committees. Unfortunately, the same is the case in the Employees (Occupational Health and Safety) Act of St. Lucia (1985) and in the Employment Safety Act of Dominica (1985). However, the provisions of Section 102 of the Barbados Factories Act (1984) seek to promote an arrangement which is consistent with ILO principles (Convention 155) and is generally recognised as capable of facilitating to the fullest extent possible, the establishment and maintenance of a safe and healthy working environment. The Section requires the employer to consult with his employees or their representatives for the purpose of developing measures to promote safety and health at the factory and to make arrangements for the participation of the employees in the improvement and development of such measures. The provisions determine that in “factories where there are 50 or more persons employed” the consultation should take place through joint safety and health committees, and “in factories where less than 50 persons are employed and it is not practical to have a [joint] safety [and health] committee” consultations should take place through one or more safety delegates appointed by the employees. It is worth noting that this wording encourages the formation of joint safety and health committees at all workplaces covered by the Act regardless of the number of employees. The only exceptions are in situations where it is “not practical” to have a committee. Somewhat more extensive provisions on the establishment and functioning of workplace joint safety and health committees can be found in the Bermuda Health and Safety at Work Act (1982) and in the Safety Committees Regulations (1984) made under that Act. With regard to joint safety and health committees, the Act and the Regulation make it compulsory for:

- the employer to establish such a committee at “places of employment” with more than 5 persons employed;
- members of the committee nominated by the employer must not be more than half of the total membership of the committee;
- minutes of the meetings to be kept, and;
- the committee to make joint inspections of the workplace at regular intervals.
Finally, it merits mentioning that quite a few countries in the region (according to the knowledge of the author of this handbook, this includes Guyana, Jamaica, Suriname, Barbados, Trinidad and Tobago and the draft CARICOM model legislation) have very recently developed draft OSH-legislation. All these drafts - with the surprising exception of Trinidad and Tobago - follow the trend in modern safety and health legislation and are based firmly on the tripartite principle as described in ILO Convention No. 155 and ILO Recommendation No. 164. The drafts place the concept of joint responsibility in focus and have consequently explicitly outlined the formation and functioning of joint safety and health committees at the workplace level.

In the absence of supporting legislation, the trade unions in the Region have succeeded in securing the cooperation of some employers in a number of cases in this regard. Similarly, some employers have succeeded in securing worker cooperation in other cases. However, in the large number of cases where the workers are not unionised, and with the non-existence of legal requirements, it is generally left to the Labour Department to promote employer-employee cooperation in the administration of the safety and health provisions at the workplace level. Joint safety and health committees, joint inspection tours, safety competitions and safety awards are usually the outward sign of a high degree of cooperation within the organisation.

It is widely recognised that good working conditions are prerequisites for increased productivity and all experiences have shown that solutions to occupational safety and health problems are best found by using consensual approaches. Workplace joint safety and health committees - established with or without supporting legislation - have similarly proven to be very useful vehicles in attempts to avoid confrontation and reach consensus.
The direct and indirect costs of accidents and ill health caused by the working environment are very large and often not fully recognised by the social partners at the workplace level. At the same time, investment plans with the objective of improving occupational safety and health standards are often discarded because of the size of the immediate investment involved. This section offers some elaboration on the mechanisms of cost/benefit analyses of measures to improve occupational safety and health standards.

When measures are implemented to improve occupational safety and health standards, the cost - or more correctly, the investment - of the measures are obviously easier to calculate than the benefits. Thus the calculation of the cost of a piece of accident prevention equipment for an accident prevention programme in a company would be based on the expenditure on purchase and installation of the equipment plus the maintenance and operating expenditure. Since the total cost would be borne by the company, a total figure would be relatively easy to calculate. Invariably, it is a much more difficult proposition to calculate the total benefits, shared as they are by the enterprise, the employer and the public at large. Additionally, some benefits may not easily lend themselves to be quantified and converted to monetary terms.

The cost of occupational injury and occupational disease is often regarded as the primary driving force behind investment in measures to improve occupational safety and health standards at the workplace. The burden of these costs rests on the employer, the worker and the society at large. The costs borne by the enterprise and the individual worker include the following:

**Costs borne by the employer:**

- Insured costs
  - workmen’s compensation (premiums)
- Uninsured costs
  - cost of lost time of injured employee(s);
  - cost of lost time of other employees and foremen, supervisors, executives;
  - cost of uninsured expenditures related to medical services
  - cost of damage to machines, tools, equipment, and spoilage costs;
  - cost of continuing the wages of the affected worker while he or she is off the job;
  - cost arising out of loss of production from the injured worker when the worker returns to work;
  - overhead cost per injured worker;
  - cost of the learning period for a replacement worker; and
  - cost of press releases, public statements and advertising to combat adverse publicity.

**Costs borne by the worker:**

- Medical expenses, i.e. doctor’s fees, hospital charges, medication, etc. (to the extent that the employer does not pick up the tab by direct payments or through insurance coverage or by the State providing coverage for those workers who do not contribute directly);
- The immediate loss of earnings during absence from work (where there is no sick leave with full payment coverage);
- Loss of future earnings if the injury or illness precludes the worker’s normal promotion or career advancement;
- The physical pain and suffering of the injury;
• payment for other services and personal aid.
• loss of income by the family (particularly important in cases where the injured worker is the sole breadwinner).

Additional categories of significant costs to be borne by the worker include the social costs, e.g. mental anguish, psychological effects, and having to live with permanent disabilities and economic difficulties.

Benefit estimates are regarded as more difficult to make than cost estimates, but values can certainly be put on benefits like:

1) increased worker productivity, which can be related to higher employee satisfaction and higher workforce morale;
2) savings from a decrease in lost work time; and
3) savings on compensation claims.

Furthermore, no enterprise can afford to overlook the financial advantages that stem from maintaining good relations with its workers and their trade unions and few would deny the significance of a positive corporate image arising out of a satisfactory accident and illness rate.

Two very different examples - one from a highly industrialised country and one from a country in the developing world - illustrate that even if investments in programmes aimed at improving occupational safety and health standards at first glance seem to be economically unwise a closer scrutiny of the benefits would change that view. It would have been in line with the thinking behind this Handbook to have included an example from the Caribbean but - despite much effort - it has proven impossible to identify a suitable one. [The reader is encouraged to bring any examples to the knowledge of the ILO for the possible inclusion in the next edition of the Handbook].

The first example is one of a very comprehensive and complex safety programme implemented in Switzerland where it was observed that the number of ladder accidents increased steadily in the years from 1980 to 1987. Ladder accidents generally cause serious injuries and cost on the average three times as much as other types of accidents. A programme addressing this problem was implemented and a wide range of activities targeted on accident prevention were conducted. The individual measures were directed not only at employees and their immediate supervisors but also at technical schools and manufacturers of ladders. The programme lasted for a year and a half and reached over 500,000 persons. One of the principal problems was that of focusing the attention of the groups of persons affected by ladder accidents on the hitherto unexciting subject of ladders. The task was rendered even more difficult by the number of languages required to be used as Switzerland has three official languages.

Before the safety programme was launched, over 40 per cent of building workers and their immediate supervisors held the fatalist view that accidents would always be inevitable on building sites and barely half of the workers and a third of their immediate supervisors supported the safety programme. After the programme, the effects of the comprehensive information campaign was clearly demonstrated as only a few still held the view that accidents were an inevitable part of day-to-day activity on building sites. Very few were equally of the view that ladder accidents should not be prevented by effective measures. During the first year of activity for the safety programme the number of accidents fell significantly (by about 500) and, on the assumption that without the programme the number of accidents would have continued to rise, a cost benefit comparison was made. On the average, a ladder accident gives rise to costs (insurance and administrative costs and lost production,) of the order of USD 8,600. In this context a reduction of 500 in the number of accidents gives rise to a cost saving of USD 4.3 million. The total expenditure on all the inputs into the programme amounted to USD 2.2 million. The conclusion
derived from a comparison of these two amounts suggests that such programmes not only reduce accident costs considerably but they also avert a great deal of human suffering.

The second example is taken from a situation in a rubber plantation in Indonesia and is, by its nature, very simple. The workers on the plantation suffered from anaemia resulting from hookworm infestation. Productivity was consequently very low. Normally such ill health would be referred to medical facilities outside the workplace and the expenditure would have to be met by the individuals or the public health care system. In this case, the employer undertook to offer the required treatment to his employees. The cost involved was 13 US Cents per worker and the resulting productivity increase was subsequently calculated to 19 per cent. Based on a number of assumptions the cost/benefit ratio was estimated to be an amazing 1:280.

In conclusion, it can be argued that if the calculations of the costs of occupational safety and health improvements can be done with more precision, then the real cost - the net cost - could turn out to be lower than for less thorough calculations. The consequence could be that where occupational safety and health expenditure would have been pruned or deferred, the decision would go the other way. However, with a more realistic cost-benefit ratio, ideally in the range where benefits are greater than costs, there is greater likelihood that the programme expenditure would have been undertaken.

Suggested further reading on this topic would include “ILO Encyclopaedia of Occupational Safety and Health”, H. W. Heinrich, “Industrial Accident Prevention: A Scientific Approach” and J. Jeyaratnam (ed.), “Occupational Safety and Health in Developing Countries.”
Total Quality Management and Occupational Safety and Health

The implementation of the Total Quality Management (TQM) concept at both private and public enterprises is a worldwide phenomenon and the number of companies seeking certification - in the ISO 9000 series - is accelerating rapidly. Some enterprises in the Caribbean have shown keen interest in the approach to human resource development offered by the concept, the Bureau of Standards in many of the countries and territories in the region have obtained adequate knowledge to give advice - and some even to issue certificates - , and seminars and workshops have been arranged by Employers’ Organisations, The Bureau of Standards, The University of the West Indies (UWI) and others throughout the region. Unfortunately, the region has also experienced situations where the name of the TQM-concept has been abused by persons and organisations to further management styles and company structures without any similarities with those described by the concept.

Facing this new challenge the workplace environment has to prepare itself and make every attempt to disclose to what extent this burgeoning worldwide trend will influence the industrial climate and working conditions. This element of the Handbook provides a brief overview of the concept and how it is likely to impact on occupational safety and health at the enterprise level.

Japan is generally credited with having pioneered the TQM paradigm since the Second World War. The result of the initiative is now history. For the first time in history a wealthy superpower nation was created within one generation by exploitation of an intangible asset - namely a new approach to business. TQM is indeed a scientific approach with no Eastern mystique. The process is not tied to any specific culture, and therefore what was done in the Eastern Pacific countries with the implementation of TQM can be done in Trinidad & Tobago, Jamaica, Guyana, Barbados, and the wider Caribbean. But before this can be done, a change of work attitude is needed at all levels in the company structure. This change in attitude must start with top management, who should adopt a type of leadership which emphasises cooperation and sharing of responsibility, rather than one which relies on power and delegation of responsibility.

Several definitions of this new approach to business - of TQM - have been suggested. One defines TQM as “Management philosophy and company practices that aim to harness the human and material resources of an organisation in the most effective way to achieve the objectives of the organisation”; another definition says that “Total Quality Management is an approach to improving the effectiveness and flexibility of business as a whole. It is essentially a way of organising and involving the whole organisation, every department, every activity, every single person, at every level”. Other definitions of TQM might vary slightly but all have as the main element the empowering and involvement of individuals, or, in other words: The human resource is the most valuable resource and potential of any organisation. A prerequisite for the full involvement of everybody is transparency in the organisation, free flow of information, a participatory and consensual approach in decision-making, fully described processes, functions, and guidelines, and mutually agreed policies and practices. An organisation governed by this concept will give serious attention to occupational safety and health.

To achieve the full benefits of TQM, a total involvement of all levels in the organisational hierarchy is a key element. Occupational safety and health professionals will by now be fully aware of this and find that their role, over the time, will change from being one of holding the ownership of occupational safety and health matters to one of co-ordinating the efforts made by management and non-management staff in these matters. Based on this, it would be safe to say that no organisation can claim to have achieved TQM if safety and health is not an integral part of the programme.

Let us now look at some of the reasons why organisations can fail in terms of health and safety performance:
• **failures of policy:**
  * they have no clear health and safety objectives;
  * existing health and safety objectives are inadequate;
  * senior management fails to recognise the importance of health and safety policy formulation;

• **failures to organise:**
  * they have not established and maintained control of safety;
  * they do not promote co-operation with the workforce;
  * they do not communicate health and safety effectively;
  * they do not secure competence;

• **failure to plan and implement:**
  * they have an inadequate or non-existent system of planning for safety and health;
  * hazard and risk assessment is inadequate;
  * policies, plans and procedures already in existence are not implemented;

• **failure to measure performance:**
  * they do not operate effective active systems of performance measurement which monitor the achievement of plans;
  * they have inadequate reactive systems to monitor accidents, ill health and incidents;

• **failure to audit and review performance:**
  * they have inadequate or non-existent systems for audit and review of performance;
  * they do not learn from past mistakes and problems.

Seen from a narrow production standpoint an accident is defined as an unplanned event which disturbs production and consequently results in a loss. Recent research suggests that for every $10.00 attributable to insured costs, there will be another $110.00 attributable to uninsured costs. This, combined with the more difficult quantifiable social costs, makes the reduction of costs by minimising losses a major role for safety within a TQM framework.

The role of safety enforcement should be significantly different with a TQM framework. The prime motivatory force to achieve successive improvements in health and safety performance should come from inside the organisation through the growth of a sound health and safety culture, rather than from outside through threat of legal action.

In TQM, inspections are regarded as wasteful and inefficient as they tend to focus on symptoms rather than causes, not appreciating that there is less emphasis on detection of faults and more on getting it right, first time. Quality control, based on inspection, is seen as flawed. In health and safety terms, inspection is also inefficient if it is the only tool utilised. As safety develops a role within TQM, the safety and health audit will become the primary tool, the test of conformity. This will inevitably require a change in strategy from those responsible for safety and health enforcement. The safety and health professional will find himself as auditor, co-ordinator, and - most importantly - trainer and educator.

The above might lead one to the conclusion that TQM is a wonder tool that, once implemented, will solve all sorts of problems at a workplace. It is, however, very relevant to warn against the dangers of “Total Quality Disillusionment” and to prescribe several remedies:
* Avoid over-stating the benefits of TQM;
* Avoid understating the commitment required from all levels in the organisational hierarchy;
* Emphasise the long, slow journey to TQM;
* Avoid creating the impression that Quality is a finite task;
* Prevent TQM being used as an instant solution, - a “quick fix”;
* Emphasise that Quality improvement requires an ongoing, never - ending commitment to reap the lasting benefits;
* Above all, ensure it is understood that TQM is a new operational philosophy which is vital to ensure the continuation and further development of most organisations in the world.

In summarising, once the TQM concept is fully implemented in a workplace according to both its text and its intention, the organisation recognises that customer satisfaction, health, safety, environmental considerations and business objectives are mutually dependent, - and that good working conditions are a prerequisite for improved productivity.

**Certification**

Once an enterprise has implemented TQM to the satisfaction of the inspectors from the respective Bureau of Standards, a certificate can be issued under the ISO 9000 series. This series of standards is developed and supervised by the International Standards Organisation (ISO) from its headquarters in Geneva and comprises the following:


It is worth mentioning that individual parts of an enterprise - e.g. the final inspection and quality control of products, the accounts department, or the maintenance department - can implement the concept and obtain certification without that necessarily resulting in noteworthy effects on other parts of the workplace.

An independent standard governing occupational safety and health management standards was being discussed in late 1996 in the International Standards Organisation. Following a multipartite meeting in Geneva in September 1996, a technical committee is now in the process of drafting such a standard. It is highly recommended that the joint safety and health committee at every workplace keep themselves abreast of any development with regards to this new standard. ISO can be contacted on the following address: 1, Rue de Varembe, 1202 Geneve, Switzerland; Telephone: +41.22.7490111; Fax: +41.22.7333430.
Implementation of the Joint Responsibility System at the Workplace Level

Preamble

As indicated previously in this Handbook, an employer and his workers must share the responsibility for occupational safety and health at the workplace. Not only is a safe and healthy working environment in the interest of both parties, but in addition they are in the best position to identify safety and health problems and develop solutions relatively quickly. By contrast, an occupational safety and health strategy and program which relies on the government inspectorate to identify the problems and impose solutions is cumbersome, inefficient and ineffective, regardless of how much dedicated effort is applied and the extensive resources which are made available.

This Joint Responsibility System must involve everyone from the Chief Executive Officer of the company to the shop floor sweeper. How well the system works depends on the level of commitment, responsibility, and accountability for safety and health assumed by the employer and workers. Workplace safety and health committees are widely recognised as being the most valuable part of the plant safety organisation for securing active employee participation in accident and disease prevention. The objective of these committees should be:

1. to bring management and workers together to review and take action on safety and health problems in the workplace,

2. to ensure that workers are aware of the agreed safety and health policy,

3. to educate workers,

4. to stimulate their interest in safety and health and, at the same time,

5. to establish a means of communication so that workers can bring to light potential safety and health hazards or make suggestions for appropriate measures, and

6. to pool knowledge and expertise available in the company.

In brief, the workplace joint safety and health committee should contribute to mutual understanding and good teamwork between management and workers to improve safety and health.

On the basis on the above, it is submitted that the joint safety and health committee has a very central role to play by being the vehicle for the implementation, development and maintenance of the joint responsibility system at the workplace. Consequently, it is the view that all workplaces, in principle, should establish a joint safety and health committee.

Legislated and/or voluntary committees

The establishment of a workplace joint safety and health committee might be prompted by a legal requirement or voluntarily, by management and worker interest. Presently in the Caribbean, only legislation in Barbados and Bermuda makes it compulsory for employers to establish workplace joint safety and health committees. Those waiting for national legislation to require companies to
establish joint safety and health committees will find that it is a general trend that all modern drafts include such a requirement. On the same note it is worth mentioning that draft legislation in Guyana, Suriname, Jamaica and Barbados do also include such provisions. The fact that it is very common in a number of countries in the Region to find joint safety and health committees at some - primarily major - workplaces can be credited to active trade unions and employers with an understanding of the nexus between good working conditions, worker participation and motivation, and increased productivity.

One ought to note that legislated committees rarely offer the ultimate model as they also have weaknesses as well as strengths.

These are a few of the issues which are worthy of some reflection.

- Committees established by legislation is a sign of an official recognition by the government of the legitimate rights of workers to be involved in solving health and safety problems in the workplace.
- Legislated committees is an advantage for unorganised workers, as the committees would make it possible for those workers to make their contribution towards improving working conditions without the support of a trade union. This point should not be neglected in the Caribbean as one would find the number of unionised workers quite low. The percentage vary considerably from country to country - in some countries as low as a mere 5 per cent to around 30 per cent in the best unionised countries. Added to this is the fact that the trade unions traditionally have targeted mainly workers employed in the public sector or government controlled companies.
- Not all workers in all workplaces will be covered by legislated committees. According to the draft legislation in Guyana, for example, only workplaces with twenty (20) or more workers should establish a committee. Additionally, occupational safety and health laws in other countries (not presently in the Caribbean) have exemptions for certain types of workplaces, e.g. the service industry, administration, agriculture, etc.
- The powers assigned to the committees by legislation are naturally of a general nature as the provision has to cover a vast amount of very different industries nationwide. Most often the legislation states quite vaguely that the joint safety and health committee is advisory to the management of the company on issues in relation to working conditions.

The importance, however, of a provision in the national occupational safety and health legislation for the establishment of workplace joint safety and health committees cannot be underestimated. Such a provision will give official recognition to the committees and provide the general framework for their functions - in other words, establish the basic requirements. It would then be left to the initiative of trade unions and employers’ organisations - and ultimately the individual workplaces - to develop the concept to make it best suited for the respective scenario.

Seen from an organisational perspective it is noted that committees established as a response to a legal requirement are formed through a top-down approach while committees established voluntarily are a result of a bottom-up approach. In a real world situation, the use of one of the two approaches only, will result in a slow and cumbersome process. The ideal situation is one where the two approaches are used to complement each other.

**Terms of Reference**

When management and workers at a workplace decide to establish a joint safety and health committee - with or without the support of a provision in the national legislation - it is highly recommended that an agreement be developed and signed by the involved parties. Where the workers are represented by one or more trade unions, the union(s) should also be signatory(-ries) to the agreement. This agreement should describe the rules and regulations of the committee and
determine what roles and functions should be undertaken by the committee and by the individual members. The following four (4) examples are slightly modified agreements presently in effect at workplaces. The first two (2) examples are drawn from workplaces in the Americas, example #3 from Scandinavia and example #4 from a workplace in Guyana. These examples are intended to serve as guides for companies in the Caribbean with already existing joint safety and health committees functioning without a formalised agreement, or companies in the process of establishing a committee:

Example 1

A joint safety and health committee shall be established with effect from 1 September 1988. The committee shall be composed of four (4) representatives, two (2) elected by the workers and two (2) appointed by the Company. The committee shall handle all safety matters. The safety committee may shut down a machine or operation which a majority of the committee (a quorum shall be 4 (four) members) agrees is unsafe. The members of the committee shall be paid at their regular rate for any time required to investigate and meet on safety and health problems. In exercising their duties and responsibilities the members of the committee shall enjoy the highest protection against reprisals of any kind.

Example 2

A Joint Safety and Health Committee consisting of three (3) employees designated by the Union and three (3) designated by the Company shall be established. The Union and the Company shall designate their respective Co-Chairmen and shall certify to each other, in writing, such Co-Chairmen and Committee members. The Committee shall hold monthly meetings at times determined by the Co-Chairmen who may also agree to hold special meetings, preferably within normal working hours. Each Co-Chairman shall submit a proposed agenda to the other Co-Chairman at least five (5) days prior to the monthly meeting. The Company Co-Chairman shall provide the Union Co-Chairman with a copy of the minutes of the monthly meeting. Prior to such monthly meetings, the Co-Chairmen or their designated representatives shall engage in an inspection of mutually selected areas of the Company. Before the monthly meeting is held, a report of the inspection shall be prepared by the Company which shall include unsafe conditions and practices observed during the inspection. A copy of the report shall be furnished to the Union Co-Chairman. All complaints or suggestions for the betterment of safety and health conditions in the company submitted by the committee shall be promptly investigated by the company. If a matter complained of is not promptly settled to the satisfaction of the committee, the majority of the committee can forward the matter to the Labour Department.

Example 3

There shall be a joint labour-management safety and health committee. The committee shall be composed of an equal number of worker and management representatives. The worker representatives shall be appointed through The xxxx xxxx Trade Union. The committee shall perform the following functions:

a) Meet at least once every month at established dates;

b) Make periodic inspections of parts of the company at least every month;

c) Make recommendations for the correction of unsafe or harmful conditions and the elimination of unsafe or harmful work practices;
d) Review and analyse all reports of industrial injury or illness, investigate causes of same, and recommend rules and procedures for the prevention of accidents and diseases and for the promotion of the health and safety of employees;

e) Promote health and safety education;

f) Accompany government inspectors and employer consultants on all surveys of the plant and participate in these inspections;

g) Investigate any worker exposure to potentially dangerous substances, fumes, noise, dust, etc.;

h) Be notified by the company of any proposed measurement of worker exposure to any potentially dangerous conditions and be involved in these measurement procedures;

i) Receive in writing the identification of any potentially toxic substance to which the workers are exposed together with material safety data sheets (MSDS). All decisions should be reached by consensus. The company shall keep minutes of all meetings and provide all individual members with copies. All members of the committee shall receive payment at their regular rate for all reasonable time spent on committee business, including time spent on inspections, handling of safety and health problems, accompanying inspectors, and on meetings. The company agrees to pay all reasonable costs of training and lost time for the members of the committee. The committee may ask the advice, opinion and suggestions of experts and authorities on safety matters.

Example 4

The Guyana xxxxx xxxx firmly believes in the importance of providing a healthy and safe environment for all its employees. The corporation recognises that foremost amongst its duties and responsibilities to its employees is the maintenance of safe practices and the provision of healthy and hygienic conditions in which to work. At the same time, the corporation considers that each employee also has a responsibility for observing all safety rules and regulations, and that each is obliged to cooperate with the management by the diligent use of safety devices, as well as protective gear.

Management will do everything possible to ensure compliance with all safety laws and guidelines and to implement a programme of continued education in the correct use of all equipment and substance deemed hazardous to health and safety.

A joint management and worker joint safety and health committee shall be established comprising five (5) members elected by the workers and five (5) appointed by management. The management of xxxxx xxxx also fully realises the importance of its responsibilities for health and safety, and at the same time expect our employees:

a) To discharge their duties not only in a safe manner but also with due regard to the health and safety of their fellow employees.

b) To report promptly any defects in equipment gear or operative system to their immediate supervisor or the manager who has specific responsibility for health and safety.

c) To support actively the work of the xxxxx xxxx safety and health committee.
The question concerning how many persons should be employed before a company is required to establish a joint safety and health committee has been discussed in an earlier section of the Handbook. In summary, in the Caribbean, only Bermuda and Barbados presently have legislation with provisions for the formation of such committees in place. In Bermuda all workplaces with five (5) or more employees must establish a committee while the similar figure in Barbados is 50 (fifty) or more.

The draft Caricom Model Legislation and the drafts covering Guyana and Jamaica all have the number of employees required to form a committee set at 20 or more. It is the view of the author and the ILO that all workplaces in principle should establish a joint safety and health committee regardless of the number of persons employed.

It is appreciated, however, that it might not be practicable for very small workplaces to establish a committee. The absence of a committee in those micro enterprises is often compensated by the fact that the interrelationship and interaction between the employer and the workers is quite good.

Based on the experience from many companies worldwide, and given the specifics of the Caribbean, it can be taken as a rule of thumb that companies with 5-10 employees or more, generally will benefit from establishing a joint safety and health committee.

About the size and structure of the joint safety and health committee

Once it has been decided to establish a joint safety and health committee at the workplace the question of the size of this committee arises. Some guidance can normally be found in the legislation even though one would most often find quite vague formulations, such as “appropriate size” or “reasonable size”. The Bermuda Guidance on Health and Safety Committee Regulations (1984) states in section 20, however, that “... the committee shall consist of no fewer than two (2) and no more than twelve (12) persons.... The Draft Caricom Model Legislation on Occupational Safety and Health section 20 subsection (6) offer some similar guidance A committee shall consist of, a) at least four persons, for a workplace where fewer than fifty persons are regularly employed; or b) at least six persons or such greater number of people as may be prescribed, for a workplace where fifty or more persons are regularly employed.” and the draft legislation for both Jamaica and Guyana carry the same formulation. Some pieces of legislation state that the committee should “…be consulted on any occupational safety and health matter with relation to the workplace...”. This sentence indicates the very important point that all departments or sections of a workplace should be represented in order for the committee to live up to the intention behind this formulation.

It seems difficult to establish firm guidelines regarding the recommended size of the committee. The important point - as illustrated above - is to ensure that all sections and/or production lines and/or departments and/or locations are represented. In some companies an informal understanding between management and workers exists, whereby management appoint their representatives to the committee from sections where no workers have been elected.

In larger workplaces, with several business places and/or with very independent sections, it may be feasible to establish a system with sub-committees.

In this model, there are six (6) section-sub-committees that deal with OSH-problems on the section level. Sub-committee a to c report to sub-committee I and sub-committee d to f report to sub-committee II. Location sub-committee I and II deal with OSH-issues on the location level, coordinate the activities in the location and act as trouble-shooters for the section-sub-committees. Those two (2) location sub-committees report to the Main Joint Safety and Health Committee which primarily is a coordinating body. Furthermore, the Main Committee deals with
OSH-issues on the enterprise level, and is the final recourse for unsolved problems arising in the sub-committees.

If one assumes that there is agreement that the section-subcommittees should have each six (6) members - three (3) from management and three (3) from the workers' side, both management and worker representatives should be employed by the relevant section. Each section (a to e) would then have a joint safety and health sub-committee, - six (6) sub-committees.

Each section sub-committee appoints two (2) worker representatives and one (1) management representative to the location sub-committee. Management would then appoint an additional three (3) representatives to ensure representation of a higher level of management, and to have an equal number of workers representatives and management representatives on the committee. The section sub-committees would thus have twelve (12) members each.

Each location-subcommittee appoints three (3) worker representatives and 2 management representatives to the Main Joint Safety and Health Committee. Management would then appoint an additional two (2) representatives (one of whom would probably be the General Manager) in this case, to ensure representation of the highest level of management and to have an equal number of worker representatives and management representatives on the committee. Consequently, this Main Committee would comprise a total of twelve (12) members.

The number of committee members will depend on the size of the workplace. But there should never be fewer than two worker representatives. The term of office should be long enough for members to gain some experience in health and safety while allowing other workers an opportunity to learn how the committee functions. A good practice might be to arrange rotating terms of office, so that a committee would never be completely made up of inexperienced members.

About the composition of the joint safety and health committee

The committee should have representation from the various levels of the organisation, i.e. workers, supervisors, middle management and top management. At the same time representation of all sections or departments would be desirable.

Management should appoint staff members with direct responsibility for departmental operations, making sure that all levels of management (foremen, supervisors, etc.) are represented in the committee. Such diversity in the representation of management would guarantee the presence in the committee of the necessary knowledge and expertise to provide accurate information to the committee on company policy, production needs, and on technical matters in relation to premises, processes, plant, machinery and equipment. Special attention should be given to the fact that the level of management commitment to safety and health issues is reflected in the level of managers appointed to the committee.

Worker representatives should be elected by their fellow workers and not selected or appointed by management. The company should provide the practical arrangement for the first election after the establishment of the committee. If the workplace is unionised it would be natural to involve the respective trade union(s) in this process. The following elections should be arranged by the committee itself.

Unless stated otherwise in the legal framework, all members of the committee should serve in terms of a duration of two (2) years. Re-appointment of management representatives and re-election of worker representatives is possible. To ensure continuity in the work of the committee, half of the committee members should renew their mandate every year (50% of the management delegation and 50% of the worker delegation). In cases where a committee member is no longer
employed at the workplace, he/she can no longer upkeep his/her membership and a substitute is appointed/elected.

The membership of the joint safety and health committee should be regarded as a part of the individual’s normal function in the company. Thus, members should not suffer any loss of pay because of attendance of meetings or at agreed activities related to safety and health, as outlined below.

Where a works medical practitioner, occupational health nurse and workplace safety officer are employed, they should serve on the committee as observers. The medical doctor most frequently used by the company may attend meetings from time to time, or only parts thereof, to give advice on specific problems or to answer the committee’s questions. A similar arrangement may be feasible where a plant is a member of a group medical service or occupational health service.

About chairmanship etc. of the committee

Many contemporary pieces of legislation (e.g. the draft legislation in Guyana and Jamaica) state that the committee should be “…co-chaired…” by a representative from management and a representative from workers. Other legal frameworks suggest that the most senior management representative should chair the committee and the worker representatives elect amongst themselves the vice-chairman. Others again suggest rotating chairmanship, i.e. when the employers’ group hold the chair and the workers’ group the vice-chair for one year and then a change in roles the following year.

All models have their pros and cons. If the model with the most senior management representative is chosen, management’s commitment to safety and health will be emphasized, and the model will offer an effective link for the implementation of safety recommendations. The model is in conflict, however, with the view that all members of the committee are equal and have equal rights. What is of utmost importance is that the choice of chairman must fall on someone who is capable of conducting the meetings in an impartial manner.

The model of co-chairmanship of the committee implies that the two chairmen have to agree on every conclusion before the item can be closed and action implemented. This approach seems to come closest to the true meaning of concept of “shared or joint responsibility” and can work in practice. Furthermore, it seems to be the most democratic.

It should be noted, that it is not the role of the chairman to conclude dictatorially but rather to ensure that consensus is reached before an item is closed. It is, after all, not crucially important to recommend one model or the other, as long as good conduct and a democratic approach prevails.

About committee meetings

The committee should meet regularly, for instance, once a month, although provisions should be made for emergency meetings to deal with urgent matters. Management should provide suitable facilities for the meetings. Meetings should take place within normal working hours, and members should - as indicated above - be allowed time off with normal pay to attend.

An agenda should be prepared by the chairman and co-vice-chairman well in advance, be submitted to each individual member of the committee, and be posted on noticeboards throughout the company for information. One item on the agenda should always be a follow-up on the decisions previously made and still outstanding. Another standing item should be a discussion about any accidents or near-misses that have taken place since the previous meeting, and yet another standing item should be the discussion of the findings of the monthly joint inspection of
aspects of the company's operations. Additionally, all employees should be afforded the opportunity to have items placed on the agenda via a suggestion box which would be sorted and reviewed by the chairman prior to the preparation of every agenda.

In a company with monthly meetings on the 20th, the time line may look like this:

- 6th: the monthly joint inspection takes place in (parts of) the company;
- 13th: the suggestion box is sorted;
- 13th: the chairman and co/vice-chairman agree on an agenda;
- 14th: the agenda is submitted to committee members and posted on noticeboards throughout the company;
- 20th: committee meeting, minutes are done as the meeting proceeds and approved and signed by the chairman and co/vice-chairman before the meeting is closed;
- 21st: minutes are submitted to committee members and posted on noticeboards throughout the company.

The meetings should - like most other meetings - be kept within the agreed time-frame and should take place in an informal atmosphere. Members should be encouraged to state their views without fear of reprisals. Care should be taken that the meetings of the committee do not degenerate into a “talk-shop”; neither should it become a forum for airing general grievances on matters unrelated to safety and health such as wages, promotion, vacation, personalities, etc. Members of the committee should always remember that the committee is not a forum for bargaining: the health, safety and lives of fellow workers are not negotiable.

The minutes from committee meetings are normally prepared by a neutral secretary who is not a member of the committee. From time to time, this task should be entrusted to the company safety officer/the management representative with responsibility for safety and health. This is a very practical model as he/she then will be responsible for convening the meetings and following up on the decisions. After all, it is not too important who keeps the minutes as they - according to the model described here - are subjected to approval by representatives from both the company and the workers in the form of the Chairman and the co-vice-chairman. In line with the concept of the committee, the minutes themselves do not have to be lengthy and rather than concentrating on who stated what, they should reflect:

a) what was the issue;
b) what action was recommended;
c) who is recommended to be responsible for the implementation of the action;
d) what is the recommended time-frame for the implementation.

The minutes should be read and approved by the members of the committee before the meeting is closed, after which they should be signed by the Chairman and Vice/co-chairman.

Discussions in the committee should always strive to be objective rather than an expression of feelings and assumptions. They should be specific about the problems and their suggested solution rather than deal in generalities.

About the tasks to be undertaken by the joint safety and health committee

Committees in some countries in the world are given extensive authority by national legislation, e.g. to control investments in occupational safety and health measures, to stop production in specified situations, to implement training and education programmes without further approval, etc. Many committees are responsible for their own budget - an element which adds significantly to the effectiveness and implementation powers of the committee. Unfortunately, this is not the case in the Caribbean.
In the Caribbean, the role of the vast majority of joint safety and health committees is an advisory one with tasks as already described and as listed below. All matters within or about the company related to occupational safety and health are issues that should be dealt with by the committee.

The first task for a newly established committee would be to develop an education programme for itself. An element in such a programme would most likely be the invitation of experts on the matter from the Labour Department, from the employers’ and workers’ organisations, and/or from private consultancies to hold sessions with the committee.

Further tasks may be defined in national legislation but this would never be an exhaustive listing. Neither is the following listing of tasks that should be undertaken by the committee, - it is intended to serve as inspiration and further development. The tasks mentioned hereunder are not in any order of priority.

- **Develop both a long-term and a short-term plan of action**

This is necessary to ensure maximum effect of any investment in improved working conditions as unlimited resources is not normally available in the real life scenario. The plans should constantly be updated and should include recommendations to the management and the workers on the establishment, maintenance and monitoring of programmes, measures and procedures to ensure and enhance the safety and health of workers.

- **Personal protective equipment**

Based on a thorough assessment of all work processes and all jobs, including information provided by suppliers of chemicals, machinery, tools, etc., the committee should develop guidelines on the use of personal protective equipment. The guidelines should include recommended type(s) and how frequently they should be replaced.

- **Reporting, recording and investigation of accidents and near-misses**

The committee should develop practices for the reporting, investigation and recording of accidents. All reports should be placed on the agenda of the following meeting of the committee. The committee should develop practices regarding the investigation of accidents. To this end, the committee may wish to appoint, for instance, two (2) members who should investigate all accidents immediately after occurrence. The recording of all accidents and incidents is important to the development of accident prevention programmes. More elaborate background information on accident investigation can be found in appendix 5.

- **Inspections**

The committee, or the committee members appointed to perform the task, should carry out regular safety inspections at the workplace, preferably once a month. Depending on the size of the company it may not be feasible to inspect all parts of the company every month, but rather selected alternating sections making sure that the entire company is inspected at least every six (6) months. The reports of the inspections provide valuable basic information on the practical situation and additionally serve to identify situations that may be sources of danger or hazard to the workers, and should be placed on the agenda of the following meeting of the committee. These regular inspections during normal working hours will also:

1. reinforce the link between the committee and the shop-floor workers,
2. stimulate interest in the committee’s activities,
3. emphasise the part played by the workers themselves in the company’s safety and health
Programmes and;
4. help to increase the prestige of committee membership.

It is worth noting that inspections can well be done by a layman once objectivity prevails and a checklist is utilised (A checklist is provided in Appendix 4);

- Training and education programmes

The committee should develop training and education programmes on occupational safety and health for the entire organisation. Such programmes should ensure that workers are cognizant of all relevant information, e.g. material safety data sheets, operation manuals, emergency procedures, proper use of personal protective equipment, etc.

- Introduction of new employees

The committee should develop occupational safety and health introduction programmes for new employees. These programmes should, inter alia, ensure that no new colleague commence working before he is made aware of the company safety policy and practices, the rules and regulations, potential hazards in the workplace, the use of personal protective equipment, etc.

- Information gathering

First of all, the committee should obtain copies of national legislation, regulations and recommendations regarding occupational safety and health. This information can normally be obtained from the employer, the trade union or the labour department.

The committee should also obtain information from the employer concerning:

a) the identification of potential or existing hazards of materials, processes or equipment;
b) safety and health experience and work practices and standards in similar or other industries of which the employer has knowledge; and
c) the conducting or taking of tests of any equipment, machine, device, article, material, chemical, physical agent or biological agent in or about a workplace for the purpose of occupational safety and health.

Furthermore, the committee should be consulted about, and have designated representatives present at the beginning of testing referred to earlier, conducted in or about the workplace if the designated representatives believe their presence is required to ensure that valid testing procedures are used or to ensure that the test results are valid.

The committee should have the right - by agreement - to seek advice from external experts and to report matters to the authorities. The committee should develop and maintain a register of chemicals and chemical products in the workplace. Material safety data sheets should be provided by the company.

- Respond to problems raised by employees

The committee should respond quickly to any problems brought to the attention of any member of the committee. Workers should be allowed - e.g. via the use of the suggestion box - to raise matters anonymously.

- Develop safety manuals
The committee should ensure that safety manuals are developed covering specific parts of, or specialised environments in the company. It is recommended that rather than developing one company safety manual which may tend to be quite voluminous, it may choose to develop safety manuals for each operational area of the company, e.g. the laboratory, the mechanical workshop, the cafeteria, the office, etc. Apart from being more user-friendly in size, such manuals would also be concise and specific.

- First aid

The committee should establish systems to ensure that first aid kits are conveniently located in the various departments of the company and that they are adequately stocked and maintained. Furthermore, it would be natural to assign the responsibility for the establishment and training of a corps of first aiders to the committee.

- The workplace and the surrounding environment

All workplaces exist and function as a part of a community and many of the pollutants and hazards, originally identified as occupational hazards, have an effect far beyond the workplace. The rising number of major industrial accidents, and their local and global impact, provides dramatic evidence that what happens within the plant deeply affects the safety, health and welfare of the local population and general environment. These major industrial accidents in various parts of the world (e.g. Bhopal, India in 1972, San Juanico, Mexico in 1984, Seveso, Italy in 1976, and Basel, Switzerland in 1986) have also demonstrated that the factory gate is not an effective barrier against workplace chemicals and agents. Even though the people and the very vulnerable tropical ecosystem in the Caribbean so far have been spared such major disasters, most environmentalists in the Region are able to mention a number of workplace accidents that have caused severe environmental threats, - the cyanide leak in the Essequibo River in Guyana in 1995 being one of them. In addition to the highly publicised catastrophes, there is a even bigger environmental problem which might be called the silent disaster in which everyday leaks, spillages and “normal emissions” find their way into the environment with considerably greater collective impact than any of the single event disasters. In fact the quiet and often unseen daily accumulation of pollutants from leaks, spills and normal operation procedures have much more severe impact on the environment than any single disaster that may hit the headlines. The workplace committee should, on the basis of a thorough investigation of the actual situation, discuss to what extent the workplace can minimise its negative environmental impact on the surrounding environment. The committee might also want to suggest policies and practice regarding the disposal of solid waste, effluent or aerial emissions. Furthermore, the committee might want to establish systems to deal with a potential uncontrolled emission, i.e. emergency procedures, early warning systems, community information, evacuation plans, etc.

- The committee members should participate in the monitoring of workplace conditions.
- The committee should have access to the relevant information on health and safety kept by the employer.

The committee should pay close attention to work organizations to ensure that with respect to hours of work and rest breaks, occupational safety and health are not adversely affected. (This is in keeping with the spirit of ILO Recommendation No. 164).

About the development of rules, practices and sanctions

Assigned with the responsibility for safety and health in the company, the joint safety and health committee should also look at developing a set of safety and health rules, regulations or codes of safe practice along with recommended sanctions to be applied in case of non-compliance or breaches. The latter might be somewhat controversial especially for those committee members
representing the non-managerial workers. The recommended method would be that once the committee has reached consensus on appropriate sanctions, those should be submitted to top-management and the involved trade unions for further negotiations and for ensuring that the suggested measures would not be in breach of any agreement between the company and the union. After management and union has reached agreement, the amended document would be returned to the committee for final adoption. Types of sanctions would vary according to the severity of the non-compliance, but would typically include oral and written warnings, transfer, and ultimately - and in extreme cases - dismissal.

It is very important to note, however, that sanctions can only be applied in cases where it is made possible to work according to the rules, where the rules and regulations are made well known to all employees, where the rules and regulations and sanctions are applicable to all employees regardless of job function, and where thorough education and training programmes have been implemented.

The following is a suggested code. It is very general in nature and would be suitable for many types of small businesses. Please note, however, that it is intended only as a model which can be re-drafted and/or amended to describe the peculiarities of a special workplace.

- All employees of this company shall follow these rules of safe practice, render every possible aid to safe operations, and report all unsafe conditions or practices to the immediate supervisor.
- Supervisors shall insist that employees observe and obey every rule, regulation and order necessary to the safe conduct of the work, and shall take such action necessary to obtain compliance.
- All employees shall be given frequent accident prevention instructions. Instructions, practice drills and articles concerning workplace safety and health shall be given at least once every five (5) working days.
- Anyone known to be under the influence of alcohol and/or drugs shall not be allowed on the job while in that condition. Persons with symptoms of alcohol and/or drug abuse are encouraged to discuss personal or work-related problems with the supervisor/company doctor/nurse.
- No one shall knowingly be permitted or required to work while his or her ability or alertness is impaired by fatigue, illness or other causes that might expose the individual or others to injury.
- Employees should be alert so as to ensure that all guards and other protective devices are adjusted and in their proper place, and shall report deficiencies. Approved protective equipment shall be worn in specific work areas.
- Horseplay, scuffling and other act which tend to endanger the safety or well-being of employees are prohibited.
- Work shall be well-planned and supervised to prevent injuries when working with equipment and handling heavy materials. When lifting heavy objects, employees should bend their knees and use the large muscles of the leg instead of the smaller muscles of the back. Back injuries are the most frequent and the most persistent and painful type of workplace injury.
- Workers shall not handle or tamper with any electrical equipment, machinery or air or water lines in a manner not within the scope of their duties, unless they have received instructions from their supervisor.
- All accidents and near-misses shall be reported promptly to the supervisor who is responsible for immediate action.

The above sample code of safe practice can be supplemented by more specific regulations, for example, regarding the use of tools and equipment, machinery and vehicles, chemicals, personal protective equipment, etc.

*Company Safety Policy*
To use the vocabulary of jurisprudence, the company's safety policy can be considered the constitution of the joint safety and health committee. Consequently, once established according to an agreement, one of the first tasks for the joint safety and health committee is to develop a Company Safety Policy. The Company Safety Policy - and along with it, all practices - should be in accordance with national legislation, recognised practices, international standards, and as a minimum, should live up to the provisions stated in those instruments. Furthermore, the Policy should reflect the specifics of Company history and tradition, specific Company issues and interests and - very importantly - the company-trade union relationship both in its written (e.g. in collective agreements) and its verbal form. Once consensus is reached in the committee on a draft policy it should be forwarded to the President and/or the Managing Director for endorsement before it is finally adopted by the committee itself. The document is a very important one as it states the level of commitment to safety and health on the side of the company and - along with the agreement on the role and functions of the joint safety and health committee - is the working basis for the committee.

Policy statements can vary in length and content, depending on whether they only contain policy, or also include company philosophies, rules and procedures. For instance, some policy statements will cover items such as assignments of responsibility, delegation of authority, description of duties, safety rules and operating procedures, and an elaboration of the committee agreement in the form of a discussion of the function of the committee. While some companies may insist on including these additional items in the policy statement, it is usually best to leave the details for later discussion.

Introductory Statement:

The written policy statement generally starts with a clear, simple expression of the company's concern for and attitude about employee safety and health. Examples of introductions to policy statements include:

- Accident prevention is a primary job for management, and management is responsible for establishing safe and healthy working conditions.
- This company has always believed that our employees are our most important asset.
- We will always place a high priority on safe operations and the safety of employees.
- People are our most important resource and their safety is one of our principal responsibilities.
- The company will, at all times, and at every level of management, attempt to provide and maintain a safe working environment for all employees. All safety programmes shall have the objective of preventing accidents.
- This company considers no phase of operation or administration more important than safety and health. We will provide and maintain safe and healthy working conditions, and establish and insist on safe work methods and practices at all times.
- All members of management and all employees must make safety a part of their daily and hourly concern.

Goal/purpose:

An effective safety and health programme will have a stated purpose or a set of goals. These goals are included in the written policy statement so that both management and workers are reminded of the purpose and value of the safety and health programme. Incorporated into the policy could be such statements as:

- The company has established our safety and health programme to eliminate work injuries to its employees. The company expects the programme to improve operations and reduce personal and financial losses.
• Safety shall be an integral part of all operations, including planning, development, production, administration, sales, and transportation. Accidents have no place in our company.
• Our goal is “no accidents” and we consider it a realistic goal.
• We want to make our safety efforts so successful that we make elimination of accidents and injuries not just a goal, but a way of life.
• We aim to resolve safety and health problems through prevention.
• It is the goal of the company to involve both management and employees in safety planning, development and implementation.

Objectives:

Also included in the policy statement can be positive steps that should be taken to implement the company's safety and health programme. Further details of this programme should be included in the action plan which would be developed by the committee once the policy is endorsed and adopted. Objectives to be considered might include:

• Working consistently to:
  a) maintain safe and healthy working conditions;
  b) adhere to proper operating practices and procedures designed to prevent injury and illness;
  c) observe national and company safety and health regulations.

• Ensuring that no employee is assigned to a job without necessary training - both in the job tasks themselves and in safety and health.
• Establishing and requiring a safety and health programme that emphasises the integration of safety and health measures into each job task so that safety and health and job performance become inseparable.
• Requiring safety orientation for new and transferred employees, timely and appropriate training, a well-functioning joint safety and health committee, a self-inspection programme, proper mechanical guards (adherence to national as well as international safety standards), and a personal protective equipment programme. - Providing safety and fire inspection to identify potential hazards of operation, then developing necessary protective measures.
• Establishing registration of accidents and near-misses and maintain good practices of record-keeping.
• Conducting accident investigation to determine the cause of accidents and the action required to prevent recurrences.
• Developing safety and health publicity and promotion to maintain interest and participation, both on and off the job.

Responsibilities:

The company safety and health action plan will describe in detail the specific assignment of responsibilities, duties, and delegation of authority. The policy statement may summarise these responsibilities thusly:

• The joint safety and health committee is responsible for developing an effective safety and health programme to be endorsed by management.
• The superintendents in cooperation with relevant members of the committee are responsible for maintaining safe and healthy working conditions and practices in the areas under their jurisdiction.
• Department heads and supervisors in cooperation with relevant members of the committee are responsible for preventing accidents in their departments.
• Supervisors will be accountable for the safety and health of all employees working under their supervision.
• Each level of management must reflect an interest in company safety and health objectives and set a good example by complying with company safety and health rules. Management interest must be vocal, visible and continuous, from top management to departmental supervisors and foremen.
• Management representatives who have been assigned safety and health responsibilities will be held accountable for meeting those responsibilities.

Employee Participation:

Companies should acknowledge the vital role of their employees in the operation of a successful safety and health programme by summarising their roles and contributions in the policy statement. The following are some examples.

• All employees are expected to follow safe working practices, obey rules and regulations, and to work in a way which maintains the high safety standards developed and sanctioned by the joint safety and health committee and endorsed by the company.
• All employees are expected to give full support to safety and health programmes and activities.
• Every employee must observe established safety and health regulations and practices, including the use of personal protective equipment.
• All employees are expected to take an active interest and participate in the safety and health programme, and abide by the rules and regulations of this company.
• All employees must recognise their responsibility to prevent injuries and illnesses and take necessary action to do so. Their performance in this regard will be measured along with their overall performance.

Closing statements:

The closing statement may reaffirm the company's commitment to provide a safe and healthy workplace, and may be an appeal for the cooperation of all company employees in support of the safety and health programme.

• All employees are urged to make the safety and health programme an integral part of their daily operations.
• By accepting mutual responsibility to operate safely, we will all contribute to the well-being of personnel and subsequently the company.
• We must be so successful in our efforts that total elimination of accidents and injuries becomes not just an objective, but a way of life.

Evaluation of the functioning of the committee

A natural part of the work of a joint safety and health committee is, from time to time, to assess its own effectiveness and ability to perform the duties assigned to it. Getting feedback from other employees will assist the committee to improve its activities and methods of functioning. The committee can obtain this feedback in a number of ways, e.g. through group discussions in a training course, by written evaluation, informal conversation, etc.

Issues of interest in the assessment would include, but not be limited to:

Level of management support
Without the support of top management, it is difficult for the committee to make effective and positive changes in the workplace. Does the management provide information when it is requested, and - even more important - when it is required but not explicitly requested by the committee? What about meeting facilities and educational leave for committee members? Do they respond in a timely and appropriate manner to suggestions forwarded to them?

Responding to problems

It is important for the committee to respond and resolve problems in a timely manner. Does the committee prioritise the problems and respond to them quickly?

Employee confidence in the committee

(a) It is critically important that workers on the shop floor level have confidence in the committee and believe that it is useful and effective in responding to their needs. It is up to the committee to build and maintain this confidence. What do the workers know about the issues dealt with by the committee?

(b) The records of the committee's activities should be available to workers. These records should include minutes of the committee meetings, its recommendations, actions the committee has taken and reasons why the actions were not taken or recommendations were not implemented.

The evaluation exercise should also include an internal discussion on what has been achieved, what have been the successes and failures and how to proceed.

It is suggested that an evaluation, as described above, is done once a year, possibly as a part of the programme for the annual retreat. After the evaluation process, the committee may find it useful to produce a small report containing the conclusions and make the report available for the workplace generally.
Programme for Workshop

The following workshop has been developed especially for use by present and potential workplace joint safety and health committees in the Caribbean. While it is highly recommended that the programme be implemented in its totality, elements of the programme can be used individually if so desired. The recommended total duration of the workshop, inclusive of breaks, is estimated at six hours. Additional elements of occupational safety and health training can be added if appropriate.

Objective:

To train present or potential members of one or several workplace joint safety and health committee(s) in their functions and responsibilities.

Participants:

A group of approximately 15 to 20 participants is the optimal size, but a slightly smaller or larger group would also be able to benefit from the exercise.

The framework provided can be used by a workplace joint safety and health committee before start-up of its activities or during a (e.g. annual) retreat. Also, two to three committees from different workplaces can go through the workshop together. To ensure the best long-term result of the workshop, it is important that all members of the joint safety and health committee participate in the full exercise.

The workshop may also be useful as a training element at seminars for trade unions, employers organisations or other organisations with interest in workplace safety and health.

Method:

The material in this Handbook provide the background material for the workshop.

Ideally a copy of the Handbook should be issued to the participants well in advance and they should be expected to have familiarised themselves with the material before the start of the workshop.

Programme:

- Opening - 15 minutes
- Introduction by instructor - 40 minutes
- Introduction to role play (role play is based on case study provided below) - 5 minutes
- Group work session # 1, preparation for role play - 20 minutes
- Role play - 30 minutes
- Report by observers, and evaluation of role play - 30 minutes
- Identification of workplace occupational safety and health problems, group work session # 2 - 45 minutes
- Plenary, coordination of group works results - 20 minutes
- Group work session # 3, prioritising the findings from group work # 2 - 30 minutes
- Plenary, coordination of group work findings - 15 minutes
- Evaluation of workshop, closing - 20 minutes.
The duration of the total workshop is estimated at six hours including lunch break and one short break.

Additionally, the instructor may find it useful to include issues of special relevance and/or interest for the target group, e.g. legislation, chemicals, ergonomics, the company’s organisational structure, company safety policy, company procedures, etc.

Case study:

The following is a brief description of an imaginary situation in an enterprise in the Caribbean:

Our company is called “Premium Cane Producers” and is the result of a recent amalgamation of two former independent sugar estates: “Melhouse” and “Bombay”. Sugarcane, which is the only crop produced, is cultivated and sold to a sugar factory nearby. Except for a few clerical workers and some employees doing mechanical maintenance, the workers are mainly occupied in the fields. The total number of workers is approximately 100. “Premium Cane Producers” has a well-functioning joint safety and health committee comprising six representatives elected by non-managerial workers (three from each of the two estates) and six representatives from management. The committee is chaired by the managing director of “Sugar Producers” formerly the chief at “Melhouse” and the vice-chairman is a non-managerial worker formerly attached solely to “Bombay”. The committee meets once a month, and for the meeting this month only one item is on the agenda. The item is about personal protective equipment (PPE), and the background is the following observations:

“Some workers at “Melhouse” have to handle different agrochemicals (herbicides, insecticides and fungicides). This work has been going on for years and workers have from time to time complained about headaches, dizziness, etc. Few PPEs are available.

“At Bombay” another group of workers has to perform the same tasks involving the same chemicals. The situation here is different as all required PPEs traditionally have been issued to the workers. It has been observed, however, that an increasing number of those workers do not want to use the PPEs”.

Instructions:

To underline the importance with which the company and the trade union regard the work done by the joint safety and health committee it is recommended that the workshop be opened by a brief address by the Chief Executive Officer and a trade union representative.

The second item on the agenda of the workshop is proposed as an introduction developed by the instructor, especially tailored to the target group and including the following points:

- introduction to the joint responsibility system;
- workplace inspections; and
- meetings in joint safety and health committees.

Background for the above can be found in this Handbook.

The next part of the workshop (items 3 through 6) is the role play of a joint labour-management safety and health committee meeting. In his introduction to the role play the instructor should again briefly, as set out in the relevant section of this Handbook, summarise the recommended modus operandus of a meeting in a joint safety and health committee. Remember to emphasise that it is the objective of the meeting to reach consensus on the solution to the problems
raised and that participants cannot invent new parts to the role play. If they have any questions or difficulties they should direct them to the instructor.

The participants are then divided equally into two groups. The members of one group are playing the roles of the management representatives in the joint safety and health committee in “Premium Cane Producers” and the members of the other group, those of the workers representatives. During group work session #1 - preferably in different rooms - prior to the role play, each group decides on its objectives and strategies, and elects six persons to play the roles in the role play. When the role play is ready to commence, the persons not allocated a role should be observers and make notes as the role play develops.

In plenary - after the role play is over - the observers are invited to report on their findings. After this, the floor should be open and from the ensuing discussion, it would be interesting and a learning experience to focus on what went wrong and why. Since a role play is based on the participants’ experience, discussion at this stage tends to be quite lively. The instructor should not attempt to control the discussion but merely act as mediator and towards the end, do a summary of the findings.

After the role play, the workshop will now start to focus on the participants’ own workplace(s). If the workshop has participants from one joint safety and health committee only, groups of 3-5 participants are formed. If two or more joint safety and health committees are participating in the workshop, the respective groups comprise the members from individual committees, i.e. if three joint safety and health committees are participating in the workshop, three groups are formed. Those groups are then subdivided into groups with 3-5 participants in each. In both cases it must be ensured that all the groups have managerial as well as non-managerial representatives. Again, it is conducive if the individual groups are able to meet in separate rooms.

Each group is then asked to identify and agree on occupational safety and health problems from their respective workplaces. It is important that the problems identified are not general statements but rather quite specific and concrete. Each group should appoint a secretary and a rapporteur take notes on the decisions.

The group work session is followed by a plenary session during which the individual groups report on their discussions and findings to the plenary. In the case where only one joint safety and health committee is represented at the workshop, the instructor’s job during the plenary is to combine the findings of the individual groups into one list of problems. Similarly, if two or more joint safety and health committees are represented, the instructor should combine the findings of the relevant groups into one total list for each joint safety and health committee represented. At the end of the plenary session, one list of problems identified will have been developed for each joint safety and health committee represented at the workshop.

The final element of the workshop comprise another group work session (#3) and a plenary. The participants are sent back to the same groups as in group work session # 2 and the task for all the groups is now to prioritise the problems already identified and to suggest solutions. All decision should be reached by consensus. Again each group should elect a secretary to record the decisions and a person to report to the plenary. The plenary is invited to hear the reports from the individual groups and in particular, to comment on the suggested solutions to the various problems.

After the workshop, the results of the last group work session should be submitted to the joint safety and health committee to be placed on the agenda on the next meeting for formal discussion and decision.