# RELATIONSHIP BETWEEN HEALTH AND SAFETY PROGRAMMES AND PERFORMANCE OF MANUFACTURING FIRMS IN MOMBASA COUNTY, KENYA

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A Research Project Submitted in Partial Fulfillment of the Requirements for the Award of the Degree of Master of Business Administration (MBA), School of Business,

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# **DECLARATION**

I declare that this project is my o	original work and h	nas not bee	en presente	ed for a	n award of
Degree in any other University.					
Signature:		Date:			
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This project has been submitted	d for examination	with my	approval	as the	University
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# **DEDICATION**

I dedicate this to my late father, Mr. Solomon Musyoka Maswili, who always encouraged me to pursue my education to the highest level.

# **ACKNOWLEDGEMENTS**

I thank my God for giving me the strength and power to complete this project and the entire MBA course despite the many challenges.

I am deeply grateful to my brother Alex Masya and my sister Mbeta Musyoka, who gave me moral support during the course and made sure everything in my house was in place even in my absence. I acknowledge my supervisor Professor Peter K'Obonyo for his guidance and tireless efforts in supervising my project. I also acknowledge Dr. Stephen Nzuve my moderator, who worked with Professor to ensure that this project was finished in time.

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# **ABSTRACT**

This research is about the relationship between health and safety programmes and performance of manufacturing firms in Mombasa County, Kenya, the objective being to establish the relationship between employee health and safety programmes and performance of manufacturing firms. A descriptive survey design was used and data was collected using a structured questionnaire comprising of Likert-scale questions which were dropped and picked later from respondents. The respondents were heads of departments in the manufacturing firms that were studied. Data was analyzed using descriptive statistics such as mean, standard deviation, percentages and frequencies. Pearson correlation analysis was used to determine the strength of the relationship between health and safety programmes and how they related to work performance. The findings were that many of the firms that responded had taken some health and safety measures and that they had shown positive effect on work performance. Among the four factors that were being investigated, health and safety measures, social welfare programmes, accident prevention programmes and occupational health programmes. The results showed that each of the four factors had a positive and significant correlation with employee performance. Therefore, the implementation of health and safety programmes at the work place has a positive impact on employees' performance. All organizations should implement health and safety programmes, not just because it is a government requirement, but because it is of great benefit to the organization, and it results to improved employee performance, therefore achieving their goals of productivity and profitability. The government, on the other hand, should ensure that it enforces the implementation of health and safety programmes at the work place as well as sending inspectorate teams to ensure that each firm is taking the right health and safety measures at the work place.

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# **CHAPTER ONE: INTRODUCTION**

#### 1.1 Background of the Study

Today health and safety is a major function of any organized human resources department. Health and Safety Programmes are concerned with protecting employees and other people affected by what the organization produces and does. It aims at protecting employees against the hazards arising from their employment or their links with the organization. Occupational Health Programmes deals with the prevention of ill-health arising from working conditions. They consist of two elements, occupational medicine which is a specialized branch of preventive medicine concerned with diagnosis and prevention of health hazards at work and dealing with any ill health or stress that has occurred in spite of the preventive actions. Occupational hygiene – which is a province of chemists and the engineer or ergonomist engaged in the measurement and control of environmental hazards (Armstrong, 2006).

Wayne, (1986) observes that accidents result from two causes, unsafe work conditions (physical and environmental) and unsafe work behaviors. Unsafe physical conditions include defective equipment, inadequate machine guards, and lack of protective equipment. Unsafe conditions and noise, radiation, dust, fumes and stress, therefore the organizations needs to put health and safety programmes in their manufacturing firms to make sure that employees don't conduct injuries or get accidents due to unsafe conditions,. The occupational safety and health administration establishes and enforces the necessary safety and health standards.

Occupational health and safety is very crucial to the manufacturing companies and should not be ignored. Human resources like any other resources require maintenance and care in order to maximize their productivity (Cascio, 1996). Therefore health and safety should not be viewed as a separate function or responsibility because it aims at improving productivity, profitability and competiveness of a firm (Pike, 2000). Employees should be protected from occupational hazards which may affect them. Health and safety at work place and employee's welfare and maintenance emerged with the onset of industrialization.

# **1.1.1** Health and Safety Programmes

Aswathappa, (2007) states that safety programmes of an organization, industrial accidents resulting from multiplicity of factors which have to be traced to their root cause which are usually faults in the management system arising from poor leadership from the top management. Inadequate supervision, insufficient attention to the design of safety into the system, an unsystematic approach to the identification, analysis and elimination of hazards and poor training facilities. The most important function of safety programmes is to identify potential hazards, provide effective safety facilities and equipment and to take prompt remedial action. This is possible only if there are: comprehensive and effective systems for reporting all accidents, causing damage or injury, Adequate accident records and statistics, systematic procedures for carrying out safety checks, inspections and investigations, methods of ensuring that safety equipment is maintained and used. Proper means available for persuading managers, supervisors and workers to pay more attention to safety matters. The safety policies of the organization should be determined by the top management and it must be continuously involved in monitoring safety performance and in ensuring that corrective action is taken when necessary. Armstrong, (2006) states that safety programs deal with the prevention of accidents and with minimizing the resulting

loss and damage of persons and property and that they relate more to systems of work than the working environment. Employees should be given instructions in first aid procedures including specialized techniques resuscitation, using the prescribed methods that can be applied while the victim is still at the top of a high voltage line pole.

Employees may be working with compounds that if accidentally released or spilled in large volumes would cause severe injury upon contact with the skin or body tissues. In such situations a common safety devise is the installation of emerging showers that provide a deluge of water to thoroughly flush the dangerous compound off the skin of the victim. Training for such workers requires not only what to do and what not to do in performing the job properly but also thorough instructions on the use of the special devices and procedures. Training may be given by the foreman or supervisor responsible for the job or the management can make use of specialists training to supplement the work of the supervisor as in case of job analysis and injury prevention (Aswathappa, 2007). Wendell, (2003) suggests that managing safety and health is one of the more difficult areas of management influencing the attitudes and behaviors that contribute to accidents. The challenge of safety management is to influence people to apply the safety principles. Mark, (2010) defines health and safety programmes as demonstrating a model programme that emphasis management commitment and employee involvement. Management commitment provides the motivating force and the resources for organizing and controlling activities within an organization. In an effective programme, management regards workers, safety and health as a fundamental value of the organization and applies its commitment to safety and health protection.

According to Robert, (1994) the maintenance of safe working conditions and the prevention of accidents are most important. Accidents prevention is the responsibility of the management and it is usually dedicated to the Human Resource Manager. In other organizations it may be the responsibility of workers, engineer or managers. The health and safety at work Act 1974 lays down broad duties which are supplemented by more detailed regulations, UK .The principle duty which the Act lays on employers as to ensure the health, safety and welfare at work of all employees. This deals with the plant and systems of work, handling and storage of materials. Mark, (2010) defined occupational safety and health as to concern the preserving and protecting of human and facility resources in the workplace. Practitioners in the field try to prevent needless deaths and injuries to workers. The discipline involves more than first aid activities and far reaching both in scope and practice. The occupational safety and health administration Act was created in 1970 within the US department of labour. It was designed to reduce occupational diseases and on the job injuries. The official mission of occupational safety and health is to ensure workers' safety and health in United States by working with employers and employees to create better working environment. In Kenya we have the health and safety Act (2007) Labour Laws which deals with health and safety and welfare of employees at the workplace. It requires an employer to create a safe and healthy conducive environment and the workplace to prevent injuries and ill health on employees and also prevent damage to property.

#### 1.1.2 Organization Performance

Richard *et al.*, (2009) defines organizational performance as comprising the actual or results of an organization as measure against its intended output (or goals and objectives). Organizational performance encompasses three specific areas of firm outcome; namely financial performance (profits, returns on assets, returns on investment, among others), Product market performance (sales, market share) share-holder return (total shareholder return, economic value added). Laurie, (2007) suggested that at the organizational level, management needs to exercise control over the behaviour and actions of staff in order to ensure a satisfactory level of performance. Managerial control systems are a means of checking progress to determine whether the objectives of the organization are being achieved. Control systems measure how effectively decisions are being translated into results to the goal achievement of the company.

Organizational performance involves the recurring activities such as establishing organizational goals, monitoring progress towards the goals and making adjustments to achieve the goals more effectively and efficiently. Those recurring activities are much of what leaders and managers inherently do in many organizations. When seeking to improve the performance of an organization it is very helpful to regularly conduct assessments of the current performance of the organization. Derek *et al.*, (2005) looks at organizational performance as long term and permanent changes in the philosophy of the organization and the way that it is managed. Performance is simply output terms- the achievement of qualified objectives. It examines how results are attained because this provides the information necessary to consider what needs to be done to improve those results. We measure performance by the following methods: balanced score card which

focuses on four indicators including customer perspective, business processes, learning and growth and financials to monitor process toward organizational strategic goals. Benchmarking using standard measurements in service or industry to make comparison to other organizations in order to gain a better perspective on organization performance. Business process, re-engineering aims to increase performance by radically re-designing the organizations' structures and processes.

# 1.1.3. Health and Safety Programmes and Organization Performance

A study performed by Integrated Benefits Institute (Kimberly, 2009) found that employees in companies with a strong emphasis on health, safety and well-being tend to work more carefully and with a greater level of focus than organizations without comprehensive employee health and safety plans. A workplace culture reflects beliefs and values, of company's leadership and workers and has a direct effect on its performance.

An organization that puts a high priority on the health and safety of employees is likely to have healthy workforce with a much better job performance record. Jinnet, (2013) suggests that more employers are increasing their focus on the Link between health and job performance in order to foster their company's success. Keller and Price in their study found that the organizational health performance is what an enterprise delivers to stake holders in financial and operational terms. It is evaluated through such measures as net operating profit, return on capital employed, total returns to shareholders, net operating costs, and stock returns. They argue that health is the ability of an organization to align, execute, and renew itself faster than the competition to sustain exceptional performance over time.

#### 1.1.4. Manufacturing Sector in Mombasa County

Manufacturing is the use of machines tools and labour to produce goods for sale. The term may refer to a range of human activity from the handicraft to high tech. but is most commonly applied to industrial production in which raw materials are transformed into finished goods on a large scale (Kimberly, 2009). Such finished goods may be used for manufacturing other more complex products such as aircraft, household appliance or automobile or sold to wholesalers who in turn sale them to retailers who then sale them to end users- the customers. Manufacturing takes turns under all types of economic systems. Modern manufacturing includes all intermediate processes required for the production and integration of products, components and some industries such as semi-conductor and steel manufacturers use the term fabrications.

The manufacturing sector is closely connected with engineering and industrial design. According to Bailey and Soyoung, (2009) manufacturing sector is defined as agglomeration of industries engaged in chemical in or physical transformation of materials substances or components into consumer or industrial goods. The manufacturing sector composes establishments engaged in mechanical or chemical transformation of material substances or components into new products. In Kenya occupational health and safety legislation is under the ministry of labour and human resources, Government of Kenya annual report (1999). In Kenya occupational health and safety policy was introduced with the enactment of factories act in 1951. The subject of occupational health and safety is very crucial to both current and future human resources managers. Often employees are injured in factories, mines, railways ports and docks leading to serious ailments and permanent handicaps (Memoria et al., 2001) if a firm is to

effectively achieve its goals and objectives it is important to ensure that the workforce is available and ready to work on continuous bases. This will be possible only if employees are protected from occupational hazards which may affect them and their productivity (Memoria *et al.*, 2001).

Due to abundant inexpensive labour force in Kenya caused by unemployment in the country some employees take workers for granted and ignore their safety and health. Some of the injured cannot find gainful employment while others are forced to turn to less lucrative employment. Many countries have tried to come up with legislations which seek to provide guidelines on health and safety issues. In the UK there is the Health and Safety Act (1974) which consolidates other previous acts like factories Act 1961. In Kenya we have the factories act 1961, office and Railways Act 1963 and fire precautions act 1971. In Kenya the enactment of the Factories Act (1961) gave rise to occupational health and safety policy. The objective of the act as stated in the Factories Act Cap. 514 Laws of Kenya is to provide overall measures to control and improve health, safety and welfare of workers in factories and other places of work. Other statutes relating to safety and health of workers are: the work injury benefits act of October (2007) which deals with the matters of compensation of employees at work. It also deals with the occupational diseases, compensation, reporting of accidents and medical aid. There is also occupational health and social - welfare special provisions and dangerous occurrences, 2007 labour laws. The assembling of component parts of manufactured products is considered manufacturing except in cases where the activity is appropriately classified. Establishment in the manufacturing sector are often described as plants, factors or mills and characteristically use power driven machines and materials handling

equipment. The manufacturing firms in Mombasa County are 55. They are distributed by sector as follows: Food manufacturing firms 2, Engineering firms 24, Furniture manufacturing firms 27 and 1 African cotton industries and 1 cement manufacturing company.

#### 1.2 Research Problem

Derek et al. (2008) states that occupational health and welfare is a broad area which includes both physical and emotional well-being. It is estimated that the worker spends about one of his time at a job site. During this time, depending on the nature of the job, s/he is exposed to various types of hazards which include accidents, noise, dust, vibration, heat and harsh chemicals among others. The annual government report of Kenya (2001) has it that from the directorate of occupational health and safety services, 68% of industrial health and safety cases were from manufacturing industry which supports the need to study health and safety programmes in manufacturing firms. Other concerns in the industries are AIDS\ HIV, alcoholism, drug abuse and job stress. Given that most industries have night shifts, Crino and Leap, (1993) noted that losses to employees and the organization are high in terms of time, monetary costs, product losses and psychological damages to the affected.

According to economists (Bailey *et al.*, 2009), manufacturing is a health producing sector of an economy where as service sector tends to be wealth consuming. Manufacturing provides important material support for national infrastructure and for national defense (Industrial policy by World Bank). Manufacturing firms in Mombasa County are situated in the south eastern part of the coast province of Kenya. The County borders Kilifi County to the north, Kwale County to the south west, and the Indian Ocean to the east.

This County has a total of 55 manufacturing firms. Food manufacturing firms, 2, engineering firms, 24, furniture manufacturing firms, 27, 1 african cotton industry and 1 cement industry. Most of the manufacturing firms' surroundings are littered by waste products, such as lubricants that pose danger to employees working within the firms and the surrounding environment. Similar studies have been carried out in Kenya at Nairobi but the same have not been carried out in Mombasa so there is a need to carry out this study. A survey of the occupational health and safety programmes adopted by the banking industry was done by Makandi, (2001) who wanted to identify the factors considered by banks as affecting health and safety of employees at the workplace and to find out the health and safety programmes adopted by banks to address the perceived hazards. She found out that safety hazards rated as important by the banks were robberies and fire but many banks did not consider the employees safety. The banks did not consider the workplace as a safety hazard and strict deadlines, workloads as well as working environment were not considered. She left a gap to be studied on:

To establish the adequacy of the legislation to address the present day occupational health and safety needs for the Kenyan worker, Mutemi, (2005) also carried out a survey of the occupational health and safety programmes adopted by chemical manufacturing firms in Nairobi. He found out that health and safety hazards which are considered as very crucial by most of the firms mostly are fire, smoking, flammables and chemical exposure. However, he left a gap of study in the food manufacturing, construction industry, flower processing, and cement manufacturing industries. Kariuki, (2006) conducted a survey on the perception of staff welfare programmes in large manufacturing firms in Nairobi. She found out that most of the firms provided staff welfare programmes such as sickness,

bereavement, counseling programmes; however, she left a gap of finding out whether there is any relation between provision of staff welfare programmes and financial performance and stability of the firm. All these studies were carried out in Nairobi and this leaves a gap of studying the health and safety programmes in Mombasa County. The research question is, 'what is the relationship between employee health and safety programmes and performance of manufacturing firms in Mombasa County?'

# 1.3 Research Objective

To establish the relationship between employee health and safety programmes and performance of manufacturing firms in Mombasa County.

# 1.4 Value of the Study

This study is important to the current and future HR managers since it will guide them in the evaluation of existing occupational health and safety programmes in their manufacturing firms, to ensure compliance into the health and safety regulations in the health and safety act 2007. This will help them to ensure that their employees are more safe and motivated.

It will also complement the efforts of the ministry of labour and the directorate of occupational health and safety through more information which need attention if health and safety of workers is to be maintained. The Government will also formulate a policy that will ensure that all the firms implement the health and safety act 2007.

The study will be significant to the researchers and scholars as it will add on the growing body of knowledge in the health and safety programmes in the manufacturing industry. This will act as a source of reference and studies to be done on this subject.

# CHAPTER TWO LITERATURE REVIEW

#### 2.1 Introduction

This chapter entails a review of the literature on employee health programmes, employee safety programmes, organizational performance, employee health and safety programmes, and organizational performance, social welfare services and summary of literature review.

# 2.2 Employee Health Programmes

Employee safety and health problems at work have been engaging the attention of psychologists, sociologists and industrial engineers since the beginning of the last century. Psychologists are concerned with the theoretical considerations of accident causation and the research into accident control through proper selection, education of employees, social and psychological factors that influence the individual's behavior in general. Engineers and safety officers render necessary advice on certain aspects of safety in industry. They look upon prevention of accidents (Memoria *et al.*, 2001). Occupational health and safety issues are concerned with ensuring and improving the working conditions of employees so that they can remain healthy and safe. The primary objectives are to uphold employee's well-being. This is achieved through studying the work environment in order to determine and identify hazards that affect employees (Cascio, 1999).

The problem should strive to place and maintain the worker in an occupational environment adapted to the physiological and psychological equipment adaptation of work to man and each man to job. Safety programmes are undertaken for three reasons as

per Desler's (1991) suggestions. Moral, economic and logical reasons, from moral perspective managers under take accidents prevention measures on purely humane grounds to minimize the pain and suffering, the injured worker and family are often exposed to as a result of the accident. Legal reasons owing to the existence of laws covering occupational health and safety. Economic reasons for being safety conscious. Since the costs of the company of even small accidents can be very high starting from medical care to compensation (Desler, 1991).

# 2.3 Employee Safety Programmes

Safety programmes dealing with the prevention of accidents and with minimizing the resulting loss and damage to persons and property. Management and supervision must be made fully accountable for safety performance in the work places they control. All employees should be given training in safe methods of work and should receive continuous education and guidance on eliminating safety hazards on accident prevention. Safety committees of employees from across the organization should serve in an advisory capacity and are responsible for such tasks as receiving safety procedures, making recommendations for eliminating specific health and safety hazards, investigating accidents, fielding related complaints from employees and monitoring compliance (Crino and Leap, 1993). There is need to measure the effect of health and safety programmes. Companies should combine accidents statistics for their operations.

Accidents are usually the results of a combination of factors each one of which varies from situation to situation e.g. unsafe acts and equipment, of people factors and conditions (Memoria, 2001). The causes of accidents have been identified as namely, chance occurrences, unsafe conditions, and unsafe acts on the part of employees. These

are mechanical and physical conditions, which arise when there are improper or inadequate safety guards on machines, when machines break down, when personal protection equipment is installed. When mechanicals or construction designs are defective and unsafe or when control devices are lacking. Absence of proper maintenance of these devices can also cause accidents. While accidents can happen anywhere there are some high danger zones. For instance, around forklift trucks, wheelbarrows and other areas. The most serious accidents usually occur near metal and wood working machines, saws or around transmission machinery like gears, pulleys and fly wheels. Other related causes are:- The job itself- some jobs are more dangerous such as the job of crane man compared to that of a fore man. Work schedules also affect accidents to increase late in the day, they are more frequent during the night shift partly due to fatigue, when someone actually requires to sleep psychological climate of work place emotionally and mentally disturbed and mentally pre-occupied people meet with more accidents than the normal persons. The psychological factors associated with accidents are fatigue, tiredness, monotony, boredom, lack of self-confidence and frustration. Unsafe acts, the behavior tendencies and undesirable attitudes cause accidents. The acts may be as a result of lack of knowledge, of skills on part of employees e.g. casuals operating a machine on night shift under no supervision of an experienced adult. Such acts include operating without authority, throwing materials e.g. used lubrication on the roads or factories environments. Operating at unsafe speed, lifting improperly, using unsafe procedures, using unsafe equipment etc. ignorance of employees refusing to use safety equipment or wear. Refusing to follow instructions while on duty. Unsafe acts can short circuit even the best attempts on your part to minimize unsafe conditions (Desler, 1991).

Top management commitment- employees need to develop a safety conscious attitude for effective reduction of accidents with the help of full commitment of top management. The top management should personally be involved in safety activities on routine basis, giving safety matters high priority in company meetings, giving safety officer high ranking and status and building safety training into new workers training (Desler, 1991).

According to the Armstrong, (2006) the achievement of the highest standard of health and safety in the work place is important because the elimination or at least the minimization of health and safety hazards and risks is the moral as well as the legal responsibility of employees- close and continuous attention to health and injuries inflicted by the system of work or conditions cause suffering and loss to individual and other dependants. Accidents and absence through ill health or injuries result in losses or damage for the organization. This includes developing health and safety policies, conducting risk assessments which identify hazards and assess the risks attached to them, carrying out health and safety audits and inspections, implementing occupational health programmes, managing stress, preventing accidents, measuring health and safety performance, communicating the need for good health safety practices. Training in good health and safety practices, organizing health and safety (Armstrong, 2006).

Occupational health and safety programmes involves developing policies and procedures that help employees by preventing them from being injured or becoming ill due to hazards in their work places. Occupational safety and health is a field where professionals attempt to prevent catastrophic losses. When they conduct or assist other managers in conducting inspection and audit, safety professionals may prevent explosions or fires that could destroy entire buildings. (Mark *et al.*,2010). Bernadin, (2007) defines occupational

injury or illness as any injury such as a cut, fracture, sprain or amputation that results from a work related accident or from exposure involving a single incidence in the work environment. He describes occupational illness as any abnormal condition or disorder other than one resulting from an occupational injury caused by exposure to environmental factors associated with the employment.

Alcoholism and drug abuse- today's business organizations are faced with alcoholism and drug abuse problems. This can cause absenteeism and the deficiency, lack of concentration, poor health, and cancer and contribute to accidents in the work place. Managers should put measures aimed at reducing and coping with stress so as to control efficiency on work. Asbestos exposure to work- the problem with asbestos drives from its presence work place air- the heaviest exposures are linked to workers engaged on general building and renovation, those involved in tyre-industry which uses tale, a product that contains asbestos like minerals. The effect of respiratory, hazards like asbestos is insidious and may not show up for long. Video displays- many employees of today must spend their time working with video display terminals which is creating a new set of health problems for workers. Short eye problems such as itching, tearing, eye strain and eye soreness faced by people working in the video display. AIDS/HIV and the work place – this is becoming a national or international disaster, this threatens the work place everywhere in the world. Many organizations are paying a lot of money in the hospitals due to AIDS /HIV related diseases and they end up losing very potential employees or they become ineffective at work. They get weak and can't perform as usual. The companies need to have a sound HIV /AIDS policy to make sure that they create HIV /AIDS awareness by training the employees, peer education which will help to reduce the

stigma faced by people with HIV /AIDs problems. Creating awareness will also help the other employees know the ways they can be infected and safer ways that will keep them away from getting infected. Work place smoking- these problems affect both the employees and employers it can be harmful to both the smokers and the non-smokers at the work place. The management should consider some smoking restrictions to ensure safety of health of workers especially in firms which deal with highly inflammable substances and smoking poses a danger of causing fire, it also cause lungs cancer to the user (Armstrong, 1998).

# 2.4 Organizational Performance

Armstrong, (2006) suggests that performance is simply in output terms – the achievement of qualified objectives. The Oxford dictionary defines it as the accomplishment, execution, carrying out, and working out of anything ordered or undertaken. High performance from appropriate behaviour and the effective use of required knowledge, skills and competencies. Brumbrach, (1988) expressed performance as "both behaviours and results. Behaviours emanate from the performer and transform performers from obstruction to action – the product of mental and physical effort applied to tasks. Health and safety reduces the number of accidents at work, it reduces the level of sickness and absence at work and this results into healthy employees under high production, good performance and productivity therefore high profits, Hughes *et al.*, (2009).

Robbins, (2003) describes organizational performance as the end result of an activity. Managers are concerned with the accumulated results of all the organization's work processes and activities. Organizational performance is a continuous improvement that focuses on improving customer satisfaction through continuous incremental

improvements to processes by removing unnecessary activities and variations, continuous improvement often perceived as a quality initiative. Culture change is a form of organizational transformation that is a radical and fundamental form of change. ISO 9000 which is an international recognized standard of quality and includes guidelines to accomplish the ISO 9000 standards (Derek, 2005).

Knowledge management- which focuses on collection and critical knowledge in an organization to increase its capacity achieving results. Knowledge management includes extensive use of computer technology. Its effectiveness toward reaching overall results for the organization depends on how well the enhanced, critical knowledge is applied in the organization. Learning organization which focuses on enhancing organizations systems to increase an organizational capacity for performance, it includes extensive use of principles of systems theory. The face of business is changing such that there are more competitors, different technology and diverse customer demands. Organization control refers to an instructed ability to affect its members and direct them towards achieving overall objectives and goals. Organizational control will lead to more effective and efficient performance because hindrances to a successful strategy have been eliminated. Changes in an organization or business can have an effect on motivation of all employees within the company. The organizational changes can have a positive or negative effect on the motivation of the workers. Improving morale and increasing the motivation of employee's help a company increase productivity and reduce turn over and absenteeism.

Organizational performance has been defined as the ability of an organization to fulfill its mission through sound management, strong governance and a persistent rededication to achieving results. Mahapastro, (2011) and Merle, (2001) define it as a set of techniques

used to measure success in meeting goals in a business context. Performance management can be used to evaluate specific processes and systems, the performance departments or the performance of individuals. Organizational performance involves the recurring activities to establish organizational goals, monitor progress toward the goals and make adjustments to achieve those goals more effectively and efficiently (McNamara, 2013).

# 2.5 Employee Health and Safety Programmes and Organizational Performance

Organizational health refers to an organization's ability to achieve its goals based on work environment that seeks to improve employee well-being. Improving organizational performance involves applying a systems thinking about organization, process and role levels and supporting employees' well-being, addressing both employee satisfaction and employee health (physical, mental, and social) (Alman, 2010). Reich *et al.* (1992) suggested that the basic objective of employee health programmes is to meet regulatory requirements, protect organizational assets, and provide safe and healthy working conditions for the workforce, public and the environment. They also observe that a healthy employee is the key factor for sustainable social and economic development. Morris, (1976) argued for a relationship between a person's work and his health condition. Health and safety is an inevitable aspect of a manufacturing process that affects employee's work and performance, therefore, a healthy worker is a productive worker (Reich *et al.*, 1992).

Ballard, (2012) talks about healthy work place programmes and suggests that successful organizations have learnt that high performance and sustainable results require attention to the relationships among employee, organization, customer and community. He states

that to sustain high performance, organizations must build the capacity to learn and keep changing over time. It suggests that getting and staying healthy involves tending to the people-oriented aspects of leading an organization. Performance is what an enterprise delivers to stakeholders in financial and operational terms. It is evaluated as net operating profit, return on capital employed, total returns to shareholders, net operating costs, and stock turns. Staying healthy is the ability of an organization to align, execute and renew itself faster than the competition, to sustain exceptional performance over time. It comprises core organizational skills and capabilities such as leadership, co-ordination or external orientation.

Occupational health and safety is concerned with protecting the safety, health and welfare of people engaged in work and employment. The goals of occupational health and safety and health programs include, fostering a safe and healthy work environment which may also protect co-workers, family members, customers and many other who might be affected by the workplace environment. International Labour Organization and World Health Organization shared the definition of the 1950 session and defined occupational health as aimed to promote and maintain the highest degree of physical, mental and social well-being of workers in all occupations, prevention amongst workers of departures from health caused by their work conditions, protection of workers in their employment from risks resulting from factors adverse to health. Therefore, health and safety reduces the number of accidents at work, it reduces the level of sickness and absence and this results in healthy employees and high productivity, good performance and productivity, therefore high profits. Safety is developing the right safety culture in reducing workplace accidents and incidents. This maintains organizational outcomes and targets in the most

effective and efficient way. The organizations should introduce an organizational performance process that is designed to assist people and their organizations to achieve occupational health and safety performance as a competitive advantage (Noel *et al.*, 2013). Bokinni, (2006) describes safety as 'a control of recognized hazards to attain an acceptable level of risk. Safety is a factor that goes beyond the control of hazards.

#### 2.6 Social Welfare Services

Armstrong (2006) states that social welfare services fall into two categories:-individual or personal services in connection with sickness, bereavement, domestic problems, employment and elderly and retired employees. Group services – which consist of sports and activities and social activities, clubs, for retired staff and benevolent organizations. Bernadin, (2003) defines employee assistance programmes as specific programmes designed to help employees with personal problems. EAPS (Employee Assistance Programmes on Safety) are a resource to intervene with violent employees, training and education programmes should incorporate stress management, active coping techniques and drug abuse awareness. Employers can make education materials available to employees and their families to help identify and handle harassment, domestic abuse, substance abuse and other emotional problems.

# 2.7 Summary of Literature Review

According to previous studies carried out on health, safety and occupational health programs, much of these have been done in Nairobi and other parts of the world. The studies show that the health and safety programs are crucial to the organizations and that this affects the performance of the organization and achievement of employees. However, little has been done in Mombasa County in the manufacturing firms; thus a study has to

be carried out on this area. Machines and equipment are also evaluated to determine their safety and medical examinations are conducted on employees to determine any health effect that may arise due to foreseeable or unforeseeable health hazards in work places. Occupational safety is concerned with accident-free work environment. The main focus is to identify, investigate, control and estimate risks and hazards that pause danger. Armstrong, (1997) suggests that work accidents may result to minor and severe injuries and sometimes cases of death reports. Machines and unsafe working environment have been identified as the main cause of occupational safety hazards, much as employees have a responsibility to ensure they are safe, the employer has the biggest contribution to make. Makandi, (2001) occupational health refers to the general state of the physical, mental and emotional well-being of employees at the work place. There are specific hazards which can give rise to occupational illness if employees are exposed to them.

Economical work schedules workloads and interpersonal relationships can also affect employee's health (Makandi, 2001). Health of employees can easily be ignored by both employer and employees alike (Schudler, 1993). This is because making the work environment safe is a straight forward case while health issues are not directly and easily recognized. Even when they can be identified it is even more difficult to get their solutions. Flippo (1984) says that accidents are costly to organizations but the greater danger lies in the many health hazards which may be difficult to see. Managers should therefore take issues of employee's health hand in hand with safety issues. Mutemi, (2005) says that the area of health and safety have gained greater importance in organizational policies and practices. Matters involving healthy and safe working conditions involve owners and employees at all organizational levels. Occupational

health and safety programmes should aim at promoting and maintaining the highest level of physical mental and social well-being of workers in all occupations and prevention of the departures from health caused by their working conditions.

# **CHAPTER THREE: RESEARCH METHODOLOGY**

#### 3.1 Introduction

This chapter comprises the research design, the population of the study, data collection methods and tools, as well as the techniques that were used to analyze the data in order to respond to the research questions.

#### 3.2 Research Design

A descriptive survey design was used. This design is used because the purpose of the study was to describe things as they are. The researcher collected data across a large number of manufacturing firms at one point in time. In this respect, the data was cross-sectional.

# 3.3 Population of Study

The population of study consisted of 34 manufacturing firms in Mombasa County. This was a census survey since all the firms were studied.

### 3.4 Data Collection

A Structured questionnaire comprising Likert-type questions was used to collect primary data. The questionnaire were dropped and picked. The questionnaire was divided into six sections representing the various variables; Section A captured the bio-data consisting of personal and company profile; Section B focused on health and safety programmes; Section C dealt with social welfare programmes; Section D addressed, accident prevention programmes; Section E focused on occupational health programmes; and Section F addressed performance. The questionnaire had open ended questions. Open ended questions sought views from the respondents which might not have been captured

by the closed-ended questions. The respondents were the heads of human resource units of the firms.

# 3.5 Data Analysis

The data was thoroughly examined and checked for completeness. Descriptive statistics such as means, standard deviations, percentages and frequencies were used to analyze the data. Pearson correlation analysis was used to determine the strength of the relationship between health and safety programmes on the one hand and the performance of the manufacturing firms on the other hand. Data was presented in tables and charts.

# CHAPTER FOUR: DATA ANALYSIS, FINDINGS AND DISCUSSION

#### 4.1 Introduction

This chapter presents the findings, analysis and discussions of the study. The chapter consists of three sections. Section one deals with response rate and the demographic characteristics of the respondents. Section two presents the results of correlation and regression analysis. Section three is a discussion of the findings in the light of the research questions.

# **4.2 Response Rate**

This study was a census and 34 private manufacturing companies operating in Mombasa County were targeted. A total number of 33 companies responded representing 97% response rate. This is a good response rate that provided confidence about the study findings.

# 4.3 Length of Service of the Respondents

Health and safety matters in an organization sometimes depend on the length of service for someone to be able to give useful comments and opinions based on experience. This study set out to establish how long each of the respondents had served in the particular company. The results are presented in Table 4.1

Table 4.1: Years of Service

Category	Frequency	Percent
Less than 5 years	6	18.2
5 -10 years	8	24.2
Over 10 years	19	57.6
Total	33	100.0

Source: (Author, 2014)

The findings in Table 4.1 on the category of years of service where the respondents fell indicated that 58% of the employees had more than 10 years of service while only a meagre 18 % had less than 5 years of service. In fact, a total of 82% of respondents had more than 5 years of service. This can be taken as a long enough period for the respondents to be able to experience health, safety and welfare matters of the company and be able to comment. On the overall, the respondents were well placed, assuming that they were objective, to give a good assessment of the issues in question.

### 4.4 Size of the Workforce in Companies under Study

The study had an item to determine the workforce sizes in the respective companies under study. The results show that majority of the companies are medium sizes with employees ranging between 100 and 500. However, there were relatively small number of large companies with staff in excess of 500. In this case, the responses can be taken to cut across various company sizes and therefore can be generalized to various company sizes. The findings are presented in Table 4.2

Table 4.2: No. of Employees in the Companies under Study

	Frequency	Percent	Valid Percent	<b>Cumulative Percent</b>
Less than 100	12	36.4	36.4	36.4
100 - 500	13	39.4	39.4	75.8
500 and above	8	24.2	24.2	100.0
Total	33	100.0	100.0	

Source: (Author, 2014)

# **4.5 Company Classification Categories**

The study was also set out to find out the type of company category among the sampled companies. The results are shown in Table 4.4. The results indicate that 94% of the

companies are private while 6 % are public. In this regard, it means that the companies under study are predominantly private.

**Table 4.3: Company Ownership Category** 

	Frequency	Percent	Valid Percent	Cumulative Percent
Private	31	93.9	93.9	93.9
Public	2	6.1	6.1	100.0
Total	33	100.0	100.0	

Source: (Author, 2014)

# 4.6 Company Ownership Citizenship

Regarding the citizenship of the company ownership, the study established that 57 % of the companies are owned by locals while 36 % of the companies are foreign owned. The ownership category has implications for seriousness with health and safety programmes. Foreign owned companies have been found to be put under higher checks and balances than locally owned companies. This is as depicted in Table 4.5

**Table 4.4: Citizenship of Company Owners** 

	Frequency	Percent	Valid Percent	
				Percent
Local	19	58	58	58
Foreign	12	36	36	94
Public	2	6	6	100
Total	33	100.0	100.0	

Source: (Author, 2014)

# 4.7 Descriptive Statistics of the Study Variables

The descriptive statistics of the study variables are shown in Table 4.6. The study was based on a 5-point Likert scale indicating the level of agreement. The standard deviation scores are around the 1 level indicating some level of stability and consistency in the

scores and the means. The mean scores for various factors, taking into account that the assumed mean is 3, were just slightly above it. This means that most respondents were on average just in agreement about the existence of the performance of the particular health and safety measures. In effect, the health and safety measures put in place by the organizations were perceived to be just adequate to contribute to the health and safety measures.

**Table 4.5 Descriptive Statistics of the Study Variables** 

	Mean	Std. Dev.	N
Health And Safety Measures	3.84	.694	33
Occupational Health Programmes	3.89	.834	33
Social Welfare Programmes	3.59	1.015	33
Accident Prevention Programmes	4.00	.837	33
Employee Performance	3.94	.843	33

Source: (Author, 2014)

## 4.8 Relationship between Health, Safety and Welfare Measures and Performance

The relationship between each of the independent variables and the dependent variable was analysed by use of Pearson correlation analysis. The results are shown in Table 4.6 below. The results indicate that health and safety measures (HSM) has a significant and positive correlation with employee performance (EP),  $r_s$  .608, p (two-tailed) < 0.01. Similarly, Social Welfare Programmes (SWP) has a significant and positive correlation with employee performance (EP),  $r_s$  .755, p (two-tailed) < 0.01. Accident Prevention Programmes (APP) also has a significant and positive correlation with employee performance (EP),  $r_s$  .852, p (two-tailed) < 0.01. On the same tone, Occupational Health

Programmes (OHP) has a significant and positive correlation with employee performance (EP), rs 700, p (two-tailed) < 0.01. In summary, each of the independent variables in this study has a significant and positive correlation with employee performance.

**Table 4.6: Correlation Coefficients for the Relationship between Health and Safety Programmes and Firm Performance** 

		HSM	SWP	APP	ОНР	EP
	Pearson Correlation	1	.684**	.649**	.504**	.608**
HSM	Sig. (2-tailed)		.000	.000	.003	.000
	N	33	33	33	33	33
	Pearson Correlation	.684**	1	.796**	.768**	.755**
SWP	Sig. (2-tailed)	.000		.000	.000	.000
	N	33	33	33	33	33
	Pearson Correlation	.649**	.796**	1	.869**	.852**
APP	Sig. (2-tailed)	.000	.000		.000	.000
	N	33	33	33	33	33
	Pearson Correlation	.504**	.768**	.869**	1	.700**
OHP	Sig. (2-tailed)	.003	.000	.000		.000
	N	33	33	33	33	33
	Pearson Correlation	.608**	.755**	.852**	.700**	1
EP	Sig. (2-tailed)	.000	.000	.000	.000	
	N	33	33	33	33	33

\*\*Correlation is significant at the 0.01 level (2-tailed). Source:(Author, 2014)

# 4.9 Results of Regression Analysis showing Health Safety and Welfare Factors Predicting Employee Performance

A regression analysis was carried out to establish health, safety and welfare factors that predict employee performance. The regression equation shows that there is a negative relationship between the health and safety measures put in place in organizations and employees performance. It also shows that there is a negative relationship between the occupational health programmes and the employees' performance. However, the results show that there is a positive relationship between social welfare programmes and employees performance. Similarly, there is a positive relationship between accident prevention programmes and employees performance. On the overall, the only significant predictor of employee performance is accident prevention programmes. The rest of the factors are not significant predictors of employees' performance. The results are shown in Table 4.7

**Table 4.7: Model Coefficients**<sup>a</sup>

Model		andardized efficients	Standardized Coefficients	Т	Sig.	95.0% Confidence Interval for B		Collinearity Statistics	
	В	Std. Error	Beta	_		Lwr Bound	Uppr Bound	Toler- ance	VIF
(Constant)	.693	.512	,	1.35	.187	356	1.743		
HSM	010	.167	008	.057	.955	352	.333	.463	2.1 62
SWP	.220	.147	.265	1.50 3	.144	080	.520	.281	3.5 64
APP	.868	.223	.862	3.89 8	.001	.412	1.324	.179	5.5 96
ОНР	251	.205	249	1.22 4	.231	672	.169	.212	4.7 25

a. Dependent Variable: EMPLOYEES PERFORMANCE Source: (Author, 2014)

$$R = .896$$
,  $R^2 = .765$ ,  $F = 21.63$ .

KEY: HSM = HEALTH AND SAFETY MEASURES, SWP = SOCIAL WELFARE PROGRAMMES, APP = ACCIDENT PREVENTION PROGRAMMES, OHP = OCCUPATIONAL HEALTH PROGRAMMES, EP = EMPLOYEES PERFORMANCE

The regression model predicting employee performance is represented by the equation:

$$Y = .693 - .010 x1 + .220x2 + .868 x3 - .251x4$$

where x1 = HSM, X2 = SWP, X3 = APP, X4 = OHP, Y = EP

## 4.10 Conclusion of the Findings

This chapter was dedicated to findings, analysis and discussions. From the foregoing presentations in the chapter it is evident that four factors were being investigated as to whether they influence employees' performance in the organizations under study. These factors are health and safety measures, social welfare programmes, accident prevention

programmes and occupational health programmes. The results show that each of the four factors has a positive and significant correlation with employees' performance. It can then be concluded that the implementation of these measures at work place have had a positive impact on employees performance.

## CHAPTER FIVE: SUMMARY, CONCLUSION AND RECOMMENDATIONS

#### 5.1 Introduction

This chapter presented the summary of data findings, conclusion drawn from the findings highlighted and recommendation made there-to. The conclusions and recommendations have been made in quest of addressing the research question or achieving the research objectives which include to establish employee retention strategies used by NGOs in Kisumu County and to determine the effectiveness of the employee retention strategies practiced.

## **5.2 Summary**

This chapter is concerned with the findings after the research was carried out and the data analyzed. The objective of the study was to establish the relationship between employee health and safety programmes and performance of manufacturing firms in Mombasa County. The research examined the health and safety programmes and how they related to work performance of the manufacturing firms. The data was collected using a structured questionnaire comprising Likert-scale type of questions. The questionnaires were dropped and picked from respondents. The questionnaire was administered to heads of departments in the firms that were studied.

### 5.3 Conclusion

The health and safety measures at work place have a positive and significant correlation to work performance therefore each and every company should practice or implement the health and safety programmes at their work place if they are to improve performance. This shows that health and safety programmes at the work place have a positive impact

on employee performance, so every employer should ensure that implementation of health and safety programmes is carried out, not just because it is an obligation of the employer, but it is also an essential benefit to the organization's performance.

#### 5.4 Recommendations

The researcher's recommendations are that all organizations and manufacturing firms should ensure that they implement the health and safety programmes at their work places not just because it is a government requirement but also because it will result to improved employee performance which is a positive result and an achievement of their goals. The government should also ensure that it does not put it as a requirement but should make sure that the health and safety programmes are being implemented by each and every work organization. The government should also send an inspectorate team to go round all the companies to ensure that these companies are practically implementing these programmes and not just displaying the health and safety acts on their notice boards.

#### 5.6 Limitations of the Study

There were limitations in finance and time. The questionnaires were dropped and needed a lot of pushing for them to be filled by the department heads. The researcher repeatedly visited the firms to get filled up questionnaires, taking about a month to get one questionnaire filled. In some other companies, the researcher was turned down before introduction. The researcher proceeded to other firms in the County. The researcher spent more for such kind of challenges enabling the study to be successfully carried out.

## **5.7 Suggestions for further Research**

Further researches could be carried out on health and safety programmes in hotel industry. To establish whether they are carrying out health and safety measures at their work places and if this is related to the employee work performance. A further study could also be carried out in hospitals to establish whether they are implementing health and safety programmes and if these relate to their work performance.

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## APPENDIX I: QUESTIONNAIRE

## **SECTION A:** BIODATA

1.	Name of the firm				 	 
2.	What is your Job designa	tion?			 	 
3.	For how long has your fir	m oper	rated in	Kenya?		
	Less than 5 years	(	)			
	5-10 years	(	)			
	Over 10 years	(	)			
4.	How many employees do	es you	compa	ny have?		
	Less than 100	(	)			
	100-500	(	)			
	500 and above	(	)			
5.	Which type of ownership	is you	r firm?			
	Private	(	)			
	Public	(	)			
	Cooperative	(	)			
	Other (specify)				 	 
6.	Please indicate if your fir	m is				
	Locally owned		(	)		
	Foreign owned		(	)		

## **SECTION B**

1. On the scale provided below, kindly rate the extent to which the safety risks to employees in your firm that have been eliminated by safety programmes put in place by the management.

Statement	To a very small extent	To a small extent	To a moderate extent	To a large extent	To a very large
Machinery					extent
Slippery floor					
Electrical wires					
Stiff and slippery stairs					
Fire exits					
Drinking water					
Ventilation					
Lighting					
Smoking habits					
Computer screens					
Screening for bombs, grenades,					
Waste disposal					
Strict deadlines for work					
Policy on health and safety					
Communication for health and safety					
Representatives for health and safety					
Medical check-ups					
Counseling services					
Furniture choice					

safety			
Representatives for health and			
safety			
Medical check-ups			
Counseling services			
Furniture choice			
2. Do you have safety officers:	Yes	 No	

## **SECTION C:** SOCIAL WELFARE PROGRAMMES

3. On the scale below, kindly rate what extent the safety risks to employees in your firm that have been eliminated by social welfare programmes put in place by the management

Statement	To a	To a	To a	To a	To a
	very	small	modera	larg	very
	small	exten	te	e	large
	extent	t	extent	exte	extent
				nt	
Enlightening employees on the					
personal health, diet, sleep, positive					
thinking					
Advising employees on personal					
security					
Financial support e.g. loans to					
employees					
Medical cover for employees					

## **SECTION D:** ACCIDENT PREVENTION PROGRAMMES

4. On the scale below kindly indicate to what extent risks to health and safety have been eliminated by accident prevention programmes put in place by your firm

Statement	To a	To a	To a	To a	To a
	very	small	moderate	large	very
	small	extent	extent	extent	large
	extent				extent
Storage of hazardous chemicals					
safety					
Pavement indication of vehicles					
and employees pathways					
Provision of right protective wear					
Advising on protective measures					
while at work					
Training employees on fire					
fighting					
Training employees on first aid					
programmes					

## **SECTION E:** OCCUPATIONAL HEALTH PROGRAMMES

5. On the scale below kindly indicate at which rate risks to health and safety have been eliminated by health and safety programmes put in place by your firm's management.

Statement	To a	To a	To a	To a	To a
	very	small	moderate	large	very
	small	extent	extent	extent	large
	extent				extent
Provision of enough spacing in the					
offices					
Less harmful work methods and					
processes					
Less harmful chemicals					
Provision of chimney where there is					
dust emission in the factory or plant					
Inexperienced machine operators					
working under supervision					
Maintenance of machines					

### **SECTION F:** EMPLOYEE PERFOMANCE

6. On the scale below kindly indicate the extent to which performance has improved after your firm's management has put all the above health and safety programmes in place. How has the following been achieved?

Statement	To a	To a	To a	To a	To a
	very	small	moderate	large	very
	small	extent	extent	extent	large
	extent				extent
Absence of injuries at					
workplace					
Increased production					
Achieving profitability					
Motivated employees					