

## **A STUDY ON EMPLOYEE SAFETY AND HEALTH IN RK METAL ROOFINGS PVT LTD, SEELANAICKENPATTI**

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**Abstract**— Organisation are made up of people and function through people. Without people, organizations cannot exist. The resources of men, money, materials and machinery are collected, coordinated and utilized through people. Human resource management is the management process of an organisation's workforce, or human resources. It is responsible for the attraction, selection, training, assessment, and rewarding of employees, while also overseeing organizational leadership and culture and ensuring compliance with employment and labour laws.

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### **INTRODUCTION**

Organisation are made up of people and function through people. Without people, organizations cannot exist. The resources of men, money, materials and machinery are collected, coordinated and utilized through people. Therefore, people are the most significant resource of any organization. According to L.F.Urwick, "business houses are made or broken in the long run not by markets or capital, patents or equipment but by men." Of all the resources manpower is the only resource which does not depreciate, with the passage of time. This resource is called human resource.

Human resource management is the management process of an organisation's workforce, or human resources. It is responsible for the attraction, selection, training, assessment, and rewarding of employees, while also overseeing organizational leadership and culture and ensuring compliance with employment and labour laws. In circumstances where employees desire and are legally authorized to hold a collective bargaining agreement, HR will also serve as the company's primary liaison with the employees' representatives.

### **Review of Literature**

EU-OSHA publishes case studies of good practices to prevent workplace risks. The cases are analysed and effective worker participation consistently appears as a basic requirement for the successful identification of problems and implementation of practical solutions, regardless of the size or type of workplace or type of problem. Many of the cases describe how worker participation took place in practice and its role in introducing successful prevention measures. This report compiles these worker participation components to provide an overview of how worker participation featured in the various cases and show the approaches and methods that were used.

This report presents the findings of a literature review that aims to identify the key reasons, arguments and motivations for employers to carry out workplace health promotion (WHP) initiatives, and discusses some of the associated challenges and obstacles. This knowledge can be used to encourage and motivate employers to start WHP. WHP is the combined efforts of employers, workers and society to improve the health and wellbeing of People at work.

Developing and sustaining a healthy work environment and workforce has clear benefits for companies and employees, but can also lead to an improvement in social and economic development at local, regional, national and European level.

This report presents the findings of a literature review that identifies the motivating factors for employees to participate in workplace health promotion (WHP). This knowledge can be used to improve WHP programmes and, consequently, participation rates. The findings section of the report is divided into two key areas. The first outlines and describes some of the key findings from the literature concerning workers' motivation to participate in WHP, and the second examines the role that diversity may play in workers' participation and recruitment.

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This report sheds light on occupational safety and health (OSH) within complex supply chain networks. Based on a literature, policy and case study review it attempts to give an overview of how OSH can be managed and promoted through the supply chain, and which drivers, incentives and instruments exist for companies to encourage good OSH practices among their suppliers and contractors.

This report examines how good leadership practices can promote better occupational safety and health (OSH) behavior amongst employees. It considers what are the necessary corporate leadership factors on which success depends. It does so by reviewing existing literature on OSH leadership. It also examines 16 detailed case studies from companies across the EU highlighting good practice, the type of activities that deliver achievements, innovative approaches, success factors and the role of stakeholders. In this report recommendations for improving OSH leadership are also made and explored.

Communicated to the workplace. Effective, transparent, balanced and open risk communication strategies tailored to workplaces are needed to help employers and workers make informed decisions and put adequate prevention measures in place.

This Guide on Economic Incentives Schemes is intended to serve as a practical and user-friendly guide to help incentive providers to create or optimise their own economic incentive schemes. Incentives schemes should not only reward past results of good OSH management (such as low accident numbers), but should also reward specific prevention efforts that aim to reduce future accidents and ill-health. Therefore the expert group suggested the development of compilations of innovative and evidence-based preventive solutions, starting with the three sectors construction, health care and HORECA.

The report shows that emergency workers have a high risk of suffering fatal accidents, injuries and other occupational diseases. Past disasters demonstrate that both communities and companies are often not fully prepared for major accidents and catastrophes. Better protection for emergency workers against occupational hazards should be given high priority, as current environmental, economic, and political developments suggest an increase in the severity and Frequency of future disasters.

The report ‘Legionella and legionnaires’ disease: a policy overview’ presents the Europeans regulatory framework and policies related to Legionella, including guidelines and recommendations of international organisations. Legionnaires’ disease is seen primarily a public health issue rather than an occupational health matter, even though it often affects workers. The report also points out the occupational aspects of exposure to Legionella.

This report provides a flavor of the range of guidance on preventing risks to taxi drivers that is available in some member states. It presents examples of good practice guidelines, risk prevention recommendations and intervention examples on the occupational health and safety of taxi drivers and chauffeurs, (who include: licensed cab drivers; unregulated ‘minicabs’; limousine drivers; company chauffeurs). The guidelines cover many different risks for taxi drivers and others who drive cars for a living, not just road safety.

This review presents reports of work-related road transport accidents, near misses, and other effects relating to ill health that give details concerning the causes and effects of the accidents. The main focus of the report is on road transport activities that take place on the public highway; however light deliveries are included, as well as buses and taxis. The overall aim is to present ‘lessons’ suitable for the non-OSH expert. The emphasis is on accident and injury resulting from occupational risks in the road transport sector that should have been prevented or controlled, not road accidents of a general nature.

This report provides a flavor of the range of guidance on preventing risks to motorcycle and bicycle delivery and dispatch riders that is available in some member states. It presents examples of good practice guidelines, risk prevention recommendations and intervention examples. The guidelines cover many different risks for dispatch and delivery riders, not just road safety.

The overall proportion of self-employed workers is stable in Europe, however there has been a marked growth over recent years in the number of self-employed working in the services and construction sectors. The level of self-employment in high risk sectors such as agriculture and construction means that the capturing of accurate OSH data for this group becomes ever more important. Currently, such information is available at European level from surveys of workers, such as Eurofound’s European working conditions survey (EWCS) and the LFS (2007 ad-hoc module on accidents at work and work-related health problems) and from accident registers (ESAW).

Although national differences in definitions, reporting rates and systems render comparative data analysis difficult, there is scope for improving the quality of monitoring of OSH for self-employed through the sharing of knowledge about current practices across Europe. This report describes monitoring systems currently in use and highlights any recent initiatives designed to improve the monitoring of OSH with respect to self-employed in ten selected Member States (Belgium, Czech Republic, Finland, Germany, Hungary, Italy, Lithuania, Malta, The Netherlands and Poland).

Around 6% of workers are involved in maintenance activities on a daily basis. Because they carry out a wide range of different activities, they are exposed to many and varied hazards at work. There are physical hazards (e.g., noise, vibration, excessive heat and cold, radiation, high physical workload), chemical hazards (work with asbestos, welding, exposure to dangerous substances when working in confined spaces), biological hazards (legionella), and psychosocial hazards (poor work organisation). Maintenance workers are also at risk of all types of accidents. Figures from EUROSTAT indicate that around 10-15% of all fatal accidents are related to maintenance operations.

Noise-induced hearing loss remains one of the most prominent occupational diseases in Europe. However, noise is no longer perceived as the only source of work-related hearing damage and increasing attention is being paid to the risks of combined exposure to high-level noise and zootoxic substances, that is, those which can affect the structures and/or the function of the inner ear and the associated signal transmission pathways in the nervous system. This publication aims to provide an up-to-date picture of our knowledge in this field. It includes: a description of the basic features of the physiological mechanisms leading to hearing impairment,

Current diagnostic tools, and an overview of the chemicals that may be deleterious to the inner ear, ranking the certainty of their zootoxic properties in a defined weight-of-evidence approach. The review also identifies the health effects resulting from exposure to multiple zootoxic substances and also from the interaction of zootoxic substances and noise, pointing out the work areas where exposure to zootoxic substances is likely. Finally, the report highlights gaps in our current knowledge for proposed future action and research.

The biological risks related to pandemics and epidemics can affect the health of many workers, particularly in specific occupations such as workers in health care, transport services or animal breeding, and workers who contribute to contingency measures when outbreaks occur. This working paper describes the main biological risks related to pandemics and major disease

outbreaks, and presents policies and practices in EU Member States in relation to how occupational safety and health (OSH) is included in the assessment, recognition, recording and prevention of major disease outbreaks and pandemics. It also contains some case studies to highlight specific occupations and biological agents, and explain how OSH policies and practices are integrated.

This report provides an overview of the most important issues related to occupational safety and health (OSH) for cleaning workers in terms of working conditions, risks and prevalence of exposures and health outcomes, and identifies information gaps and challenges.

Cleaning includes a broad range of activities performed in different work environments across all sectors. The risks to which cleaners are exposed therefore depend on the tasks they perform and the premises they work in. As most of the cleaning work is performed as contract cleaning, employers sometimes face difficulties in controlling the OSH conditions in the "host companies" where their staff work.

Accessing information on occupational accidents and diseases remains challenging as cleaning workers are spread over different sectors and it is therefore difficult to put monitoring systems in place. In addition, a significant part of the cleaning workforce is undeclared, especially in private households, which also complicates data collection. Studies on work-related diseases indicate that MSDs, respiratory diseases, including asthma, skin diseases and mental ill health are the most common work-related health effects found in cleaners, and suggest a higher prevalence of health problems in cleaning workers than in other sectors.

Interaction with – and dependence on – technology is increasing in almost all fields of work. Given that a poor human-machine interface can have serious consequences in terms of occupational accidents and diseases, including stress, its proper inclusion in design equipment and workplace is of utmost importance. Based on a literature survey and a small expert survey, this report explores how the human-machine interface influences occupational risks, describing who is exposed, and giving some examples of what can be done to reduce the risk.

Nan materials possess various new properties and their industrial use creates new opportunities, but they also present new risks and uncertainties. Growing production and use of nan materials result in an increasing number of workers and

consumers exposed to nan materials. This leads to a greater need for information on possible health and environmental effects of non materials. Increasing mobility of workers is one of the growing demographic changes worldwide and it is likely that migration will increase in the next decade. The aim of the report is to provide an overview of the most important issues relating to the occupational safety and health (OSH) of migrant workers.

### **OBJECTIVES OF THE STUDY**

- To find out the satisfaction level of employee towards safety and health measures provided by the company.
- To find out the cause for occurrence of accidents.
- To help the organization to attain the goals effectively and efficiently motivated employee.
- To increase ethical policies and behaviour inside and out the organization.
- To establish the relation with employees and management

### **SCOPE OF THE STUDY**

The labour investigation committee preferred to include under labour welfare and safety measures are anything done for intellectual, physical, mental and economic betterment of the worker whether by employers, by government or by other agencies over and above what is laid down by law or what is normally expected on the part of the contracted benefits for which worker may have bargained. According to the committee on labour welfare services should mean such services, facilities and amenities an adequate canteen, rest and rest and recreation facilities, medical facilities including social. Security measures which contributes to conditions under which worker and employed.

### **LIMITATIONS OF THE STUDY**

- Night shift labours were not included in this study due to paucity of time.
- Time constraint is another major limitation.
- This study did not focus on all the units of Sugar Factory Limited.
- So the result may not be applicable to all the units.
- The responses might be subject to the bias of the respondents.

### **RESEARCH METHODOLOGY**

#### **PERIOD OF THE STUDY:**

The period of the study is for 4 Months, covering Dec 2013 to Mar2014.

#### **SAMPLE SIZE:**

Out of the total population of 100 employees a sample size is 50 respondents were selected for the study.

#### **RESEARCH DESIGN:**

The study is carried out by adopting Descriptive study. Descriptive study describes the state of affairs as it exists. The researcher has no control over the variable. Researcher can only report what has happened or what ishappening.

#### **DATA COLLECTION:**

The method of the data collection for the study, are two ways.

- Primary data
- Secondary data

#### **PRIMARY DATA**

Primary data refer to information obtained first hand by the researcher. In this study, the researcher used interview method by using structured questionnaires, telephone interviews for collecting the primary data, here primary data collected through questionnaires.

**SECONDARY DATA**

Secondary data means data that are already available, they refer to the data that have already been collected and analyzed by someone else. Secondary data may be either published data or unpublished data.

Published data are available in various publications of the state, central or local government, books, magazines, newspapers, reports and publications of various associations connected with business and industry, banks, stock, stock exchanges and ect..,

**HYPOTHESIS**

To the following null hypothesis is framed.

- ✓ There is no relationship between age group and level of satisfaction.
- ✓ There is no relationship between qualification and level of satisfaction.

**TESTING OF HYPOTHESIS**

To test the respondents' opinion about the facilities offered based on the age group .

AGE	16-25	26-35	36-45	Above 45	Total
Yes	8	10	5	10	33
No	2	6	5	4	17
Total	10	16	10	14	50

**Null hypothesis (H0):**

There is no relationship between age group and the facilities offered to the respondents.

**Alternate hypothesis (Ha):**

There is a relationship between age group and the facilities offered to the respondents.

**CHI- SQUARE TEST:**

Chi-square test = (O-E)/E

O = Observed frequency

E = Expected frequency

E = RT\* CT/GT

RT=row total

CT=column total

GT=Grand total

**CHI-SQUARE TEST**

AGE	O	E	O-E	(O-E) <sup>2</sup>	(O-E)/E
R1C1	8	6.6	1.4	2.0	0.303
R1C2	2	3.4	-1.4	2.0	0.588
R1C3	10	10.56	-0.56	0.3	0.028
R1C4	6	5.44	0.56	0.3	0.055

R2C1	5	6.6	-1.6	2.6	0.394
R2C2	5	3.4	1.6	2.6	0.765
R2C3	10	9.24	0.76	0.6	0.065
R2C4	4	4.76	-0.76	0.6	0.126
	(O-E)/E = 2.324				

**Degrees of freedom**

$DF=(R-1)(C-1)$

$= (2-1)(4-1)$

$= 3$

Calculated value = 2.324

Table value at 5% level = 7.815

Since the calculated value is less than the table value, hence the hypothesis can be accepted and it's clear that there is no relationship between age group and Level of satisfaction.

**TESTING OF HYPOTHESIS**

To test the respondents' opinion about the facilities offered based on the a Qualification.

QUALIFICATION	Belo10 <sup>th</sup>	SSLC	HSC	Graduate	Total
Yes	3	5	15	10	33
No	2	5	5	5	17
<b>Total</b>	5	10	20	15	50

**Null hypothesis (H0):**

There is no relationship between the Qualification and the facilities offered to the respondents.

**Alternate hypothesis (Ha):**

There is a relationship between Qualification and the facilities offered to the respondents.

**CHI- SQUARE TEST:**

Chi-square test  $= (O-E)/E$

O= Observed frequency

E = Expected frequency

$E = RT * CT / GT$

RT=row total

CT=column total

GT=Grand total

**CHI-SQUARE TEST**

QUALIFICATION	O	E	O-E	(O-E) <sup>2</sup>	(O-E)/E
R1C1	3	3.3	-0.3	0.09	0.027
R1C2	2	1.7	0.3	0.09	0.053
R1C3	5	6.6	-1.6	2.56	0.388
R1C4	5	3.4	1.6	2.56	0.753
R2C1	15	13.2	1.8	3.24	0.245
R2C2	5	6.8	-1.8	3.24	0.476
R2C3	10	9.9	0.1	0.01	0.001
R2C4	5	5.1	-0.1	0.01	0.002
	(O-E)/E = 1.945				

**Degrees of freedom**

$$DF=(R-1)(C-1)$$

$$= (2-1) (4-1)$$

$$DF=3$$

Calculated value =1.945

Tabulated value = 7.815

Since the calculated value is less than the table value, Hence the hypothesis can be accepted and it's clear that there is no relationship between qualification and Level of satisfaction.

**FINDINGS :**

1. Numbers of employees are more in the age group of (26-45).
2. Medical inspection is employee's majority (40%) are satisfied with medical inspection.
3. Majority (44%) of employees are satisfied with the Rest room facilities provided by the company.
4. Employee's participation in safety and health Policy is less the policies are decided by the top Management.
5. Majority (40%) of the women respondents are satisfied with medical facilities.
6. Majority (48% ) of employees are satisfied with the Complaints are handled by the senior officer.
7. Majority (50%) of employees are satisfied with the routine job.
8. Majority (10%) of employees are not satisfied with safety measures provided to the employees.
9. Majority (36%) of employees are not satisfied with the compensation.
10. Majority (16%) of employees are not satisfied with the safety training is provided to new employees.
11. Majority (42%) of employees are satisfied with the physical work Environment that is kept clean and spacious.
12. Majority (40%) of employees are highly satisfied provided with quarters facilities.
13. Majority (58%) of employees are highly satisfied provided with Factory facilities.
14. Majority(40%) of employees are higher secondary level qualification.
15. Majority(100%) of employees are male in the organization.
16. Majority(70%) of employee are satisfied with the co-operation in the organization.
17. Majority(54%) of employee are satisfied with the refreshment Facilities.

**SUGGESTIONS :**

- ❖ Minor accidents are common in day-to-day yearly occurrence while major accidents rare (i.e) fire accidents proper training should be provided to the employee to handle machinery and to fight fire.

- ❖ New machinery should be properly examined before Implementation and employee should be thoroughly trained in Using the new machinery.
- ❖ Sufficient number of spittoons should be provided as they are no spittoons in the organization.
- ❖ If someone is on medical leave other Employees also feel that they are in safer side.
- ❖ Company should be provided proper precautionary measures to the employee while lifting excess weight.
- ❖ Married people feel that family problem affects performance so Counseling could be given to employees to distress from the Pressure of work and family life.
- ❖ Company can consider allowing its employee to participate Information safety and health policies.

**CONCLUSION:**

The study conclude that the maximum accident occurs in the company due the amature knowledge of machine. The medical facilities can be provided to the family members of the employee as beneficial factor. If the suggestion given in the study are carried Out, the safety and health of employee will be increases substantially. The Company can provide Secure life policy to the employee as safety measures .The decision of the employee plays the vital role for company's growth. The Co-operative sugar mill limited can conduct some refreshment training program for employee welfare as well as for company improvement

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