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Abstract

The article presents the results of a survey which was conducted to examine Occupational Safety and Health at The Alma Jordan Library (AJL), University of the West Indies, St. Augustine. The initial research was conducted in 2009 using primary data which was collected through a sample survey designed in the form of a detailed questionnaire, along with interviews with senior members of the Administrative and Professional Staff. Random sampling was used to select employees who participated in the survey. The findings of the research revealed that several areas in the AJL were found to be deficient. This includes non-compliance with some provisions of the OSH Act of 2004 and other key areas needed to develop a safe and healthy work environment for employees including organization culture, employee participation, indoor air quality (ventilation), ergonomics and training. After the 2009 survey, an assessment was done in 2014 to ascertain whether changes were made to comply with the OSH Act of 2004.

Keywords: Library staff: Employees; Occupational health and safety; Legislation; Natasha Grant; The University of the West Indies, St. Augustine, Alma Jordan Library
Introduction

Occupational safety and health (OSH) is generally defined as “the science of the anticipation, recognition, evaluation and control of hazards arising in or from the workplace that could impair the health and well-being of workers, taking into account the possible impact on the surrounding communities and the general environment” (Alli 2008). The scope of occupational safety and health has evolved gradually and continuously in response to social, political, technological and economic changes. In recent years, with the advent of globalization of the world’s economies and its repercussions, it has been perceived that this phenomenon was the greatest force for change in the world of work.

The space in modern university libraries has become more complex and multifunctional to accommodate new forms of data and new philosophies of learning triggered by the computing revolution. Edwards (2009) stated as library collections are rarely static and have a tendency to grow in an unexpected fashion, the management of space, health and safety issues become even more crucial in periods of rapid growth. The St. Augustine Campus of the University of the West Indies experienced exponential growth over the years as it was mandated by the Government of Trinidad and Tobago to increase enrolment. The University saw increases in the student population from 16,094 in 2008 to 18,173 in 2014.

The Alma Jordan Library (AJL) at the St. Augustine Campus is adjusting its services and facilities to create supportive learning environments for its users. This change initiative brings with it continued health and safety issues and there have been questions and concerns about the implementation of the Occupational, Safety and Health (OSH) Act and its impact on the AJL. The article presents some components of the results of a survey which examined employees and management’s perception of OSH compliance in the Library and how the AJL measures up against the OSH Act of 2004. It also presents changes which were made to the library since the 2009 survey was conducted.
Background

The present building of the AJL has been in existence for over 45 years. Approximately 130 workers are housed in the building and on a daily basis it facilitates roughly over one thousand persons which includes, University staff, students and visitors. The health and safety environment at the AJL is guided by the University of the West Indies Health and Safety Management System. This type of system is a process put in place by an employer to minimize the incidence of injury and illness to workers involved in the operations carried out by an employer. This is accomplished through the identification, assessment and controlling of risks to workers in all workplace operations.

The current management system employed by the Health and Safety Office of the University of the West Indies at the St. Augustine Campus is that of the Occupational Safety and Health Assessment Series (OSHAS) 18001 Management series. This specification states the entire requirement for an OSH Management system, enabling organizations to control their risks and improve their performance.

The structure of OSHAS 18001 is similar to that of ISO 14001, the environmental management standard system and has essentially the same elements. It was developed to be compatible with ISO 9001, the quality management system standard, and ISO 14001 to allow companies to register and develop integrated quality, environmental and occupational health and safety management systems.

The elements of the OSHAS 18001 system include:

- Development of OSH policy
- Hazard identification and risk assessment
- Identifying legal requirements
- Setting OSH objectives
- Training employees
- Implementing OHS control measures
• Establishing an OSH Management program
• Emergency planning
• Document and record control
• Internal audit programs
• Corrective and preventative action
• Management involvement and review.

This specification is intended to address Occupational Health and Safety rather than product and safety services. This particular management system allows for the effective implementation of the functions of the Health and Safety Office and the functioning of the Health and Safety committee (Smith 2005).

**Literature Review**

Alli (2008) mentioned that it is the responsibility of the employers to ensure that the working environment is safe and healthy. This means that they must prevent, and protect workers from, occupational risks. But employers’ responsibility goes further, entailing knowledge of occupational hazards and a commitment to ensure that management processes promote safety and health at work. The OSH Act 2004 of Trinidad and Tobago states that all workers should expect to have a safe and healthy work environment. The Act further points out that “It shall be the duty of every employer to ensure, so far as is reasonably practicable, the safety, health and welfare at work of all his employees” (Sec 6:1) Ultimately, it is the employer’s responsibility to ensure compliance, that proper training occurs, that the correct forms are filled out, and most important of all, that a hazard-free atmosphere exists for all employees.

Hackitt (2009), and Health and Safety Executive (2004) suggest that the top management has both a collective and individual responsibility for health and safety as well as to provide leadership in this sphere. In addition, Hackitt (2009) also indicated that ensuring a company's approach to health and safety remains grounded in what is **practical** and **useful** is fundamental to good leadership.
Health and safety management is not about “elimination of all risk - it is and has always been about doing what is sensible and proportionate - what is 'reasonably practicable' - to manage foreseeable risk and then getting on with the task” (Hackitt 2009). It is only by understanding the true health and safety risk profile of the organization and then addressing the highest risks that management can demonstrate real and credible leadership.

Alli (2008) purports that management’s commitment to occupational safety and health may be demonstrated in various ways such as:

- Allocating sufficient resources (financial and human) for the proper functioning of the occupational safety and health program
- Establishing organizational structures to support managers and employees in their OSH duties
- Designating a senior management representative to be responsible for overseeing the proper functioning of OSH management.

Management must have the proper systems in place to effectively combat health and safety matters. Hence, the implementation of an occupational safety and health management system is necessary.

The legislation guides the implementation of OSH in any organization. In Trinidad and Tobago the OSH Act of (2004) does not stipulate any regulation or specific guidelines for libraries or any industry, what the laws simply provide are guidelines for organizations to adopt and adhere to in order to be compliant.

In comparing the Laws of Trinidad and Tobago to those of Canada and the United States of America (US) there were some similarities as well as some differences which warrants mention. In Canada, the Canada Occupational Health and Safety Legislation states “The law makes both the employer and the employee jointly responsible for workplace health and safety legislation” (Canadian Centre for Occupational Health and Safety 2006). In the US, the Act does not cover four categories of people (self-employed persons, farms which only employ immediate family
members of the farm employer, workers covered by other legislation and state and local government employees.) The Canadian legislation indicated

“The responsibilities of the employer were to establish and maintain a joint health and safety committee, or cause employees to select at least one health and safety representative. They are also required to take every reasonable precaution to ensure the workplace is safe. The Employer is to inform employees about any potential hazards and provide training to work safely. In addition, they must provide personal protective equipment and ensure workers know how to use the equipment safely and properly” (Canadian Centre for Occupational Health and Safety 2006).

The US legislation outlines two main duties for the Employer which states “employers must provide a workplace which is free from hazards that are known to cause or likely to cause death or serious physical harm to employees” and secondly, “employers must comply with occupational and health standards under the Act” (United States Department of Labour).

Appropriate legislation and regulations, together with adequate means of enforcement, are key policy instruments for the protection of workers. These efforts form the basis to improve working conditions and the working environment. Therefore, ultimately total commitment on the part of management to making health and safety a priority is essential to a successful OSH program in the workplace. It is only when management plays a pivotal role that workers view such programs as being worthwhile and sustainable. Management has the influence, power and resources to take initiatives and to set a pattern for a safe and healthy working environment.

**Employees and OSH**

Employee participation has been identified as a key precondition of successful OSH management and a major contributing factor in the reduction of occupational diseases and injuries. Alexander (2004, 7) noted that “workers who operate in unhealthy or unsafe working conditions, with the perception that management have little or no regard for their safety and welfare will never respect and appreciate their bosses. They will perform the simplest of tasks with little zeal and their diminishing morale will be aggravated when challenged to ‘go the extra mile’”. He
iterated, “Their loyalty to company and company goals will be near zero and their search for greener pastures will be a priority.” Therefore, it is imperative that employees are aware of their duties and responsibilities under the Act.

Hughes and Ferret (2003) claimed that employees were responsible for their own safety and health. They had to ensure that their actions will not jeopardize the safety and health of other employees and they had to be alert to observe and correct, or report unsafe practices and conditions. Hughes continued his arguments by saying, employees had to maintain a healthy and safe place of work and cooperate with managers in the implementation of health and safety matters. Employees had to make suggestions to improve any aspect of health and safety and they had to maintain an active interest. He also maintained that employees had to learn and follow the operating procedures and health and safety rules for safe performance on the job. Lastly, Hughes and Ferret (2003) said employees had to follow the established procedures if accidents occurred.

However, as MacLean (2011) highlighted “Safety is not something that can be imposed; the responsibility has to be owned by individuals who play their part in creating as safe a working environment as possible for themselves and others.”

**Health and Safety Practices and Academic Libraries**

Clarke (2002) in writing about the library environment at the AJL which was then referred to as the Main Library questioned “Is the library environment safe enough and healthy enough?” To this he answered in the negative. In his findings he mentioned that “The proper care and preservation of library and archival material generally entailed round the clock air conditioning.” However, he also noted that having such a system implemented meant that “it was all well and good for the library resources but not necessarily so for the human resources.”

Knowles (2009) said “Air conditioning has become ubiquitous in modern living both in residential and commercial settings.” He also elaborated the point and further mentioned that there are differences in design guidelines for Air Conditioning with regards to “Out-door Air
Requirement for Ventilation”. Both Clarke (2002) and Knowles (2009) drew reference to the recirculating indoor air and this is of grave health concerns to persons employed at the Library.

In Clarke’s article he acknowledged that with the passing of legislation by the US Environmental Protection Agency on the Clean Air Act many organizations had to implement corrective measures when installing air conditioning units because it now meant persons who worked within air-conditioned environments were working with the exclusion of natural air. To this end the Agency indicated “That not being exposed to natural air for several hours a day could, in the long run, have a telling effect on human health, and that an enclosed environment is replete with microbial content”.

Knowles (2009) also spoke of microbial content but in the context of Volatile Organic Compounds (VOC’s). These he described as any organic substance that can exist in gaseous form mixed with air. As in the Library system VOC’s can originate from adhesives which are used on a daily basis, fabrics can also contribute because these products emit small quantities of substances such as Acetone, Ethanol, Ammonia and Formaldehyde. The concentration of these substances as well as Carbon Dioxide can increase overtime because of the recirculation of the air by the AC system and this can result in headaches, fatigue, changes in pulse rate and general feelings of stuffiness. Therefore, we can appreciate that outdoor air ventilation is essential to an efficient building and the safety and health of the workers.

There are other safety and health practices at the Library which require mention. The literature informs us that the concept of zero risk in the workplace is very unrealistic and in order to create an optimally safe and effective workplace no single element such as people, equipment, tasks or environment can be considered in isolation as each affects the others.

Both the Canadian Centre for Occupational Health and Safety (2006) and Health and Safety Executive (2004) stated that most library accidents result from slips, trips and falls, lifting objects, being caught in or between things and punctures or cuts. They also mentioned that library work has a number of other health and safety hazards which include psychological stress,
back injury, personal safety concerns, inadequate workstations, inadequate lighting, dust, moulds, and poor indoor air quality.

Murray (2003) spoke to the issues of slips, trips and falls. She spoke of worn carpets and treads on the stairs, she looked at the placement of electrical cords in particular laptop cords which have been cause for grave concern to both staff and other users of the Library. Electrical cords are often a major problem, persons using their laptop computers often just find a power outlet and do not realise that the cord is in an area where people are walking through and can cause someone to trip.

The following table summarizes common safety concerns in a library.

<table>
<thead>
<tr>
<th>Safety Hazards</th>
<th>Causes</th>
<th>Preventive measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trips, slips, falls, sprains, strains fractures</td>
<td>Clustered floors, slippery patches, trailing cables, improperly stored materials, open cabinets, drawers and doors</td>
<td>Good housekeeping, proper workplace layout, safe work practices</td>
</tr>
<tr>
<td>Cuts and abrasions</td>
<td>Poorly designed office equipment, sharp edges on furniture/equipment</td>
<td>Properly designed tools and equipment</td>
</tr>
<tr>
<td>Burns/electric shock</td>
<td>Faulty wiring, poorly wired electrical equipment, static electric build up</td>
<td>Electrical safety training, routine safety checks, safe handling procedure, grounding</td>
</tr>
<tr>
<td>Headaches, drowsiness, flu-like symptoms, skin irritation, shortness of breath</td>
<td>Poor indoor air quality stress</td>
<td>Improve ventilation system, clean up moulds and fungi Minimize stress factors</td>
</tr>
<tr>
<td>Allergies</td>
<td>Dust and moulds</td>
<td>Housekeeping, Ventilation Clean-up moulds and fungi</td>
</tr>
</tbody>
</table>

Table 1 adapted from Canadian Centre for Occupational Health and Safety. *Health and Safety Guide for Libraries* (2006), pp.136
Rooney (1994) acknowledged “Libraries had previously been regarded as congenial places for study.” However, the reality is often far from this and libraries are frequently not ergonomically designed. In libraries the areas which have the greatest potential of ergonomic concerns are:

- work using computers
- book check out and return
- Re-shelving returned books
- Pushing book trolleys
- Moving book return boxes
- Work environment.

Clyde (1994) commented that in libraries

“where computers are used, as in other workplaces, research has shown that problems can result from a range of activities, including long periods spent looking at a monitor (particularly if this is done under adverse lighting conditions); using input devices such as keyboard, mouse, trackball, touch screen, or handheld bar code reader; sitting for long periods in an inappropriate position while using the computer; and performing tasks under stress… however, when sensible precautions are taken and risks are minimized, personal efficiency is increased.”

Ergonomics, in libraries will continue to be a topic discussed throughout time because as technology hurtles forward, librarians and other library staff are finding themselves using new equipment and new procedures that dramatically change the nature of their work.

Paterson (1999) wrote that a library is an investment in humanity. He indicated that Library directors need a vision of the future, for example an effective training programme. Health and safety training is a very important part of the health and safety culture and it is also a legal requirement. Under Section 6:2d of the Occupational Health and Safety Act, 2004, “the employer must provide adequate information, instruction, training and supervision to employees so that they can work in a way that is safe and without risks to health”. Training is one of the most important tasks to be carried out by employers. Workers need to know not only how to do
their jobs, but also how to protect their lives and health and those of their co-workers while working.

Alli (2008) acknowledged that training in occupational safety and health should not be treated in isolation; it should feature as an integral part of job training and be incorporated into daily work procedures. The need to give appropriate training in occupational safety and health to workers in an organization cannot be overemphasized. Training at all levels should be seen as a means of improving working conditions and the work environment. These training include induction, job specific, supervisory and management and specialist.

Research Methodology
A survey instrument consisting of 19 questions was administered to staff in the library using stratified sampling. Three semi-structured interviews were also conducted with the Head of the Library, the staff member responsible for the maintenance of the building and the Librarian who oversees Health and Safety issues in the Library.

There are various levels of staff in the library: Academic (Librarians), Non-Academic (Library Assistants I, II and III, Library Attendants, Office Assistants, Clerical staff, IT support, Printers and Binders), and the Daily paid staff (Handymen and Cleaners). As a result of this diversity, a stratified sample (simple random sample) was chosen. The Staff directory (Sampling frame) was utilized to divide the staff into their respective categories (sub-frames) based on key independent variables and then a random (unbiased) sample from each of those subpopulations were chosen. Out of the one hundred and thirty persons employed, eighty five were chosen to complete the questionnaire. A total of forty-six persons responded.

Findings from 2009

H&S Awareness and Risk Management

The question was asked of a total of 46 respondents of their awareness of the Library’s Health and Safety policy. Thirty percent stated their awareness of the policy while 70% stated they
were not aware of such a policy. Management indicated that there was no written health and safety library policy. In fact there is a Disaster preparedness document which has been developed for use in cases of emergencies. Therefore the “Yes” could refer to this document which is available to staff in the library. The responses are in Figure 1.

![Are you aware of the Library's H & S Policy](image)

Figure 1

Questions were asked to determine whether the respondents knew if the Library had a plan in place for managing risks. The pie chart I Figure 2 shows that 46% indicated ‘No’ they were not aware, while 32% said ‘Yes’ a plan existed and the remaining 22% had ‘No Response’ to the question.

The response from the management team was that “Preliminary risk assessments have been conducted, however to date not much has been done to ensure that these risks are contained or eliminated all together.” Also, there has been a system in place where ‘Safety Wardens’ are utilised. The safety wardens act as an intermediary line of defence and in the event that some emergency should occur, the safety wardens are located on each floor of the Library and in every department to assist and inform the relevant persons.
Training

The respondents were asked if they were provided with the necessary Health and Safety training which is required by law. There was a resounding negative response with 70% indicating that the Library does not provide the necessary training. While on the other hand, 24% said ‘Yes’ that training is provided and a mere 6% did not respond to the question. The graphic representation of this data is available in Figure 3. Management said ‘Yes’ to this aspect of health and safety by the fact that they have been committed to allowing persons the opportunity to gain exposure in some areas of health and safety training. The Campus Librarian indicated that the Library is committed to health and safety training and that several persons have gone on numerous training exercises. Note that when respondents were asked if they received any type of health and safety training the responses which are presented in Figure 4 show that 72% said Yes and 28% said No.
Training is vital in any organization and at the AJL initiatives have been taken to afford some members of staff training in some areas of health and safety. One of the interviewees has indicated “Some attempts have been made towards having staff attain the required training, but budgets and resources must be put in place in order to fully appreciate the training and also to put the learning into use in the organization.”

The researcher asked the respondents to identify the specific type of training which was received. The data presented in Figure 5 shows that 48% indicated they received ‘Emergency evacuation training’, an additional 29% received training in ‘Fire safety’ while, 14% had training in ‘First Aid’. No one had received any psychosocial related training but 9% had some training in ‘All of the above.’

Management has given their commitment to health and safety training. The Campus Librarian informed the researcher that she supports the staff in their training efforts and has facilitated them with the necessary time off to attend training.
Figure 4

Have you received H&S training?

- Yes: 28%
- No: 72%
- No Response: 0%

Figure 5

If 'Yes' what type of training did you receive?

- Fire safety: 29%
- First Aid: 14%
- Emergency Evac. Proc: 9%
- Psychosocial issues: 48%
- All of the Above: 0%
Impact of OSH and Compliance

In an attempt to further understand how health and safety is treated at the Library, respondents were asked how had the OSH Act of 2004 impacted on the organization? The responses varied significantly. Thirty five percent said the Act had impacted on the organization, however, 56% said the Act had no impact on the organization at all; while 9% chose not to respond. Management indicated that with the introduction of the OSH Act there has been changes in the way the Library operates. There has been an impact of sorts because the Library now has to be proactive instead of reactive in their approach to Health and safety issues. The Act now will guide the Library’s future policies and procedures concerning health and safety matters.

In addition to asking of the Act’s impact, the staff was questioned about their thoughts on the Library’s compliance as shown in Figure 6. There were 56% of the responses agreeing that the library complies ‘Sometimes’ with the necessary guidelines. Another 11% said that they ‘Often’ comply and 9% said they ‘Never’ comply with the Act. Further examination indicated that 6% believed that they ‘Rarely’ did comply and the remaining 18% chose either not to respond or stated it was ‘Not applicable’. Management indicated that they do comply with the necessary guidelines. For instance the Act requires or stipulates that risk assessments be conducted by all organizations so as to have an idea as to what needs to be done to ensure a safe and healthy work environment. At the Library a preliminary risk assessment has been conducted and the necessary steps are now being taken to address the issues.
It is interesting to note how someone’s perception can influence their judgement. When the question was asked as to who has been given the responsibility for OSH within the Library 52% stated the ‘Head of Building’ was responsible for OSH. Twenty two percent did not respond to the question, while 11% believed that ‘All Employees’ were responsible for OSH at the library. In fact, 6% thought the ‘Campus Librarian’ was responsible and 7% indicated the responsibility rests with the ‘Head of the Department’, leaving 2% thinking it was their ‘Supervisor’ who held that responsibility. The results are presented in Figure 7.
Health & Safety Culture

Several questions were asked to determine impressions of a Health and Safety culture in the Library. A large percent (70%) of the respondents said the Library did not have a health & safety culture. However, 26% did believe that such a culture existed and a mere 4% did not respond to the question. Management agrees that a health and safety culture needs to be developed in the Library and is in full agreement with the 70% of staff who also admitted that a health ans safety culture was nonexistent in the Library.

Figure 8

In developing an H&S culture, all levels of staff has to have an input in shaping the culture. Respondents were asked whether or not they were involved in the health and safety decision making process in the Library, 80% indicated they were not involved in the decision making process and 20% said they were involved in the process. See Figures 8 and 9 for data presented on the health and safety culture.
The question was asked ‘Is health and safety valued at the library?’ and the responses showed that 59% of the persons surveyed said ‘Sometimes’ health and safety was valued. Another 26% said it was ‘often’ valued while 4% indicated it was either ‘Rarely valued or ‘Not Applicable’. The remaining 7% had ‘No response’ to the question. Management’s consensus on this question is ‘Yes’. They are firm believers that health and safety is valued at the Library. However, there is also the belief that an effective system needs to be put in place to allow for the proper structures and implementation to occur.

For health and safety to be meaningful and the culture to be established, workers must be aware of the safety rules in their area. At the Library 52% of the staff indicated their awareness of such rules while, 41% said they were not familiar with the safety rules in their work area. 7% however, did not respond to the question. The results are captured in Figure 10.
Working conditions are of paramount importance when looking at health and safety. At the Library 41% of the staff indicated that the working conditions were ‘Good’, 13% thought they were ‘Very good’ and 24% felt the conditions are ‘Satisfactory’. Not withstanding this, 11% said the conditions were ‘Unsatisfactory’, 5% thought they were ‘Poor’ with the remaining 6% stating either the conditions were ‘Very poor’ or they had ‘No response’ as presented in Figure 11.

Staff were asked to state their ergonomic concerns for the final question, 27% pointed out that ‘working with computers’ were their main concern. Twenty-two indicated ‘the working
environment’ was their concern while, 16% said dealing with ‘Book check out/return’ was their issue of contention. 14% made no indication as to their concerns, with 8% stating either they had issues with all of the concerns and the pushing of book trolleys. A mere 4% said reshelving was their concern and 1% said moving the book return boxes was an issue of concern. See Figure 12 for the data presented.

![Pie chart showing ergonomic concerns](image)

Figure 12

**The Interviews**

The data from the interviews were very informative and in some cases corroborated the information that was given by staff from the survey which they completed. The information has highlighted areas where the Library needs to concentrate on and place meaningful emphasis, in order to be fully compliant with the recommendations and guidelines that have been set out in the OSH Act of 2004 and its amendments. While some responses have been provided above, it is to be noted that the library has developed and undertook some of the following safety initiatives:

1. Preparation of safety document
2. Management has ensured that all staff were provided with ergonomically designed chairs
3. All exit signs have been replaced and are illuminating as they should
4. All alarming systems have been checked on a regular basis
5. Emergency lights have been replaced and repaired where necessary
6. Preliminary risk assessments have been conducted
7. Some measure of training has been done with regards to compliance with the Act
8. Corrections made on the basis of those recommended by the University Safety Officers.

Data Analysis

Health and Safety at the AJL is a work in progress. The data collected shows areas which need to be addressed, while other areas have been dealt with. Employers can show their commitment to OSH by allocating sufficient resources for the proper functioning of an OSH program. They can also establish organizational structures to support employees in their OSH duties and they can designate a senior management representative to be responsible for overseeing the proper functioning of OSH Management. Efforts have been made by the Alma Jordan Library’s management to have recommendations implemented. However, the manner in which these efforts have been communicated or the lack of communication is perhaps why employees do not believe that management is committed as they say towards their health and safety at the organization.

In addition, employee participation has been identified as a key precondition of successful OSH management and a major contributing factor in the reduction of occupational diseases and injuries. Participation is a fundamental workers’ right as well as a duty. However, from the data reviewed, 80% of employees believe they are not involved in the decision making process, another 59% has the view that health and safety is sometimes valued at the Alma Jordan Library, whilst an additional 24% feels the working conditions are satisfactory. All these factors impact on staffs’ views and hence impartial judgments are made from their perceptions as to how they are treated and the manner in which they view events.
Another critical aspect of this research involves training. Health and safety training is a very important part of the health and safety culture and it is also a legal requirement. The OSH Act of 2004 categorically states “Workers must be provided with the necessary information, instruction, training and supervision to ensure a safe work environment” (Sec 6:2d) and having stated this, it is clear that staff must have the necessary and appropriate training in order to conduct their task. However, training at the Main Library was said to be lacking by 72% of the staff. The figure represented persons who never received health and safety training, the remaining 28% was exposed to some measure of health and safety training in areas such as First Aid or Emergency Evacuation procedures.

In keeping with training, workers need to be aware and conscious of the safety rules in their specific work areas and by extension the entire organization. A great percentage (52%) of the staff were aware or familiar with the safety rules within their work areas and this familiarization came about as a result of their daily routines. However, there were those employees (41%) who were not familiar and this apparent unfamiliarity was due to the lack of sufficient training. This particular type of information should be transmitted to the staff members at their induction training and if not then at the point of them joining the particular library unit. Therefore, again it comes right back to the ‘Culture’ of the Organization. If training is not considered a priority for the organization, then it will not be treated as such and the employees will be at a disadvantage.

Though some measures or gaps have been highlighted by the study, it must be mentioned that the staff (41%) believed that the overall working conditions at the Alma Jordan Library are ‘good’ as compared to a mere (5%) who felt the conditions were ‘poor’. From a general overview however, if the staff receives the necessary training, which will provide them with the information, guidelines and increase awareness of health and safety issues, then they will begin to look at situations from a more proactive standpoint and be willing to accept responsibility for their actions instead of ‘passing the buck’.
The staff believe that the responsibility for OSH within the Library is that of the Head of the Building. This is not true under the OSH Act of 2004. Contrary to belief, it is everyone’s responsibility for health and safety under the Act. Both employer and employee can be charged under the law if found to be in contradiction with the law. The OSH Act provides for the fining of organizations and the criminalizing of corporate executives and managers or other persons who may be responsible for its contravention and non-compliance, or whose actions fail to respect the health and safety and welfare of workers as well as the general public.

On the other hand, the Act also provides for the disciplining of employees for not adhering to the safety provisions. Apparently, the Act limits the grounds for and the manner in which a worker can be disciplined. The Act states “An employer may discipline, in the customary manner an employee who breaks the safety provisions of the Act” (Sec 10:3). But, an employee cannot be disciplined for exercising his rights under the Act to protect himself from any hazards that may exist in the workplace.

Further to this, the point of hazard identification and the reporting of such must be raised. The survey indicated that 48% of staff felt that management was quick to notice hazards and correct them, but there was a 2% margin which separated the ‘yes’ from the ‘no’ and that meant almost the same amount of staff believed that they did not. Hazard identification is not just the responsibility of management, it involves all parties. It is difficult for any one party to be aware of all the hazards which exist in an organization. This issue should be a collaborative effort because it is a legal requirement for every employer to conduct a health and safety audit to determine the risks to workers’ health and safety on the job as well as the risks to the health and safety of the public arising out of the organization’s operations. (Sec 25G:1,2,3)

**Recommendations and Conclusion**

In the five years since the study was conducted there has been some minor changes. The idiom “The more things change the more they remain the same” seems to express how and where the Library is currently with OSH compliance. In 2009 several recommendations were suggested by
this researcher to the Alma Jordan Library Management team for consideration. One such recommendation was to publicize its OSH policy. To date that has been done to some extent. The University of the West Indies now has a functioning Occupational, Health & Safety Unit which oversees all Departments on the Campus. A campus Occupational, Health and Safety policy has been developed and it has been disseminated to all Departments to display.

It was suggested to introduce a behavioural approach to health and safety. Personal responsibility for safety will assist the Library to achieve an advanced safety culture in which everyone, regardless of position, accepts responsibility and plays an active role in improving the safety of his or her immediate environment. In this culture, all personnel think about the tasks they are about to undertake, assess and mitigate any risks, actively look after themselves, their colleagues and others, always intervene when unsafe behaviours or conditions are observed and share their knowledge and experience freely.

Also, the idea of change management systems to support the desired culture was suggested. For example perceived management commitment can be improved by:

- Providing managers with the skills to be effective safety leaders
- Motivating managers to change by monitoring performance (leading indicators)
- Rewarding effective performance

This recommendation can only be effective after the desired culture has been achieved. Literature shows that institutional safety culture has been evolving over the years, due to a number of factors including legislation, training and awareness and responsibility.

Hence, a recommendation to offer training and re-training to all members of staff in all areas of Health and Safety was also given. This will give the indication to employees that management does care and is willing to encourage staff to practice the proper training techniques if and when the need arises. Thus far training in basic CPR and First Aid has been advertised and some members of staff have taken advantage of this aspect of training.
Another element which consideration was given to was that of **temperature and humidity**. Thermal comfort depends on air temperature, humidity and air movement. Acceptable ranges for temperature and humidity are often referred to as the comfort zone in which a person feel neither too cold nor too warm. The ASHRAE standard 55-1992, “Thermal Environmental Conditions for Human Occupancy”, recommends the following acceptable temperature at relative humidity of 50% and air speed less that 0.15m/sec.30fpm as 23-26°C. From 2009 to now, the AJL has experienced extreme heat and cold in the temperature as a result of a malfunctioning AC. Although a new central air conditioning unit was installed in late 2014, the comfort zone has not yet been fully achieved. Some adjustments must still be made to achieve and maintain a suitable temperature.

Lastly, an action plan was also offered for consideration and it indicated the what, why, when, by whom and the timeframe in which objectives should have been achieved. Today, the action plan\(^1\) is still very much applicable and can be revisited as an instructional tool.

Between 2009 to 2014, Health and Safety efforts at the Alma Jordan Library have been ongoing and the gaps that exist are being addressed, albeit at a slow pace, in order to achieve complete compliance with the Trinidad and Tobago OSH Act of 2004. In the mean time however, as MacLean (2011) rightfully stated, “It is impossible to put in place adequate control measures for people who know what they ought to do and who still do what they ought not. The goal has to be to equip a workforce and library customer population to exercise informed common sense.”

\(^1\) The Action plan is presented as an appendix to this paper. It is available as an external link accompanying the paper. [http://journals.sta.uwi.edu/clj/papers/jan15/Occupational_Health_and_Safety_Action_Plan.pdf](http://journals.sta.uwi.edu/clj/papers/jan15/Occupational_Health_and_Safety_Action_Plan.pdf)
References


