



## Research Article

# Impact of an Onsite Occupational Health Clinic on Organisational Performance and Employee Wellbeing at a Southern African Maritime Port

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### Abstract

**Objectives:** The purpose of the study was to explore the perceptions of employees on the impact of an on-site occupational health clinic on organisational performance, and employee wellbeing at a southern African maritime port.

**Methods:** A qualitative research methodology was used in this study through employing an exploratory design. This qualitative research study comprised a sample population of fifteen purposively selected employees. Data was collected through semi-structured interviews using an interview schedule.

**Results:** The overall findings of the study indicate that 66.67 per cent of the respondents perceived the on-site occupational health clinic as having improved the organisation's lost work time, employee morale and workforce productivity. There were 20 per cent of the respondents who perceived the on-site occupational health clinic as not having improved the organisation's lost work time, employee morale and workforce productivity. Only 13.33 per cent of the respondents were uncertain about the impact of the on-site occupational health clinic on the organisation's lost work time, employee morale and workforce productivity.

**Conclusion:** It could be discerned that the impact of the on-site occupational health clinic at the Southern African Maritime Port was largely related to its convenience and to the trust it was capable of engendering in the employees it served. A recommendation was that an on-site occupational health clinic should be regarded as an investment in human capital, in order to enhance organisational performance excellence and maintenance of a leading edge.

**Keywords:** Employee wellbeing, onsite occupational health clinic, organisational performance

There is growing recognition about the linkages between working conditions, health, and productivity.<sup>[1]</sup> It is observed that at industry and institutional level, the importance of health is often played down.<sup>[2]</sup>

It is unfortunate that there is a paucity of available evidence on the impact of on-site occupational health clinics on organisational performance and employee wellbeing at the Southern African Maritime Port's home country and continent. The few available studies on the impact of on-

site workplace clinics are mainly based in North America. It would be critical to evaluate the impact of the on-site occupational health services or clinics not only in economic terms but in terms of how they are perceived by the employees, for which they are intended to serve. It has to be acknowledged that perceptions can determine success or failure of any programme, especially if they influence the health and wellbeing of employees. This can directly impact on the performance of the organisation. A study re-

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vealed that on-site health care is a powerful recruiting and retention tool, as most employees view on-site health care favourably.<sup>[3]</sup> Workplace on-site healthcare generally proves to be convenient, offers quality care that is less expensive than community-based care, and helps employers build a trust relationship with providers and employees.

Some studies report that corporate executives-particularly Human Resource (HR) personnel-have begun to appreciate the link between employee health and workplace performance and the need to provide programmes that optimise workforce health and organisational productivity.<sup>[4]</sup> Yet, a key service generally lacking in the so called workplace health and wellness approach is the strategic role that employee health can play in workforce productivity. This observation is true in terms of what is currently happening at the Southern African Maritime Port, despite the implementation of on-site occupational health clinics across all business units of the firm.

The significance of this study was to enable the management of the firm to recognise the gaps in terms of the approach for implementation of a workplace health strategy and to contribute towards effective alignment of occupational health with the organisational and operational goals of the firm. Burton observed that diagnosing the specific problems by involving a cross-section of employees affected by the problem may enable the firm to come up with a problem-solving process that involves employees in the decisions that affect them, showing trust in workers.<sup>[5]</sup> Ultimately, the intervention will be more likely to be effective than previous attempts.

Such small successes may subtly shift the firm to a different management style, and make significant changes in the organisation of work, thus, having positive spin-offs on employee health, job satisfaction and morale. Since there is limited data on similar research studies both nationally and internationally, it was envisaged that this research would help to improve the general body of knowledge on on-site occupational health clinics and workplace health strategies and their alignment with the organisational and operational goals of a firm, both academic and practical.

The aim of the study was to identify the perceptions of employees towards the impact of an on-site occupational health clinic at a Southern African Maritime Port.

## Methods

A qualitative research methodology was used in this study because it can be an effective way of both evaluating and making changes in occupational health policy and conditions. Because of the legal and political context of the work environment, quantitative measures of work environment

factors may not capture what is really going on.

An exploratory research design was used in this study which was conducted in 2010. In this study, the researcher sought to gain insight about the effectiveness of the on-site occupational health clinic, by interviewing a sample of employees that had used the clinic.

The Southern African Maritime Port that was of focus in this study had a total population of 426 employees of which nineteen were managers and the rest were junior staff. Eighty per cent of the employees at this site were blue collar employees and the remaining twenty per cent were white collar employees. Male employees constituted seventy per cent and female employees constituted thirty per cent of the total employee population at this site. The literacy level of the total employee population at this site was 40 per cent. The average age of the total population was 43 years.

Maximum variation purposive sampling was used in this study. A total of fifteen employees were sampled. The motivation for doing qualitative research, as opposed to quantitative research, comes from the observation that, if there is one thing which distinguishes humans from the natural world, it is our ability to talk!<sup>[6]</sup>

In depth semi-structured interviews were used to obtain primary data from the sample group. This instrument was considered because semi-structured interviews can assist the researcher in finding out why things are the way that they are, as well as aid in understanding the barriers and opportunities for change. Despite the lack of a p-value, a report with quotes can be effective at persuading decision-makers to pay closer attention to occupational health and safety issues.<sup>[7]</sup>

In this study, the interview schedule was based on a written script of one kind with varying levels of flexibility designed into the interview schedule. It allowed a test of open-ended questions and themes for discussion.

The research instrument was first tested on a purposively selected smaller sample comprising only five employees. This pilot survey enabled the researcher to categorise the open-ended questions to a reasonable degree, and to evaluate the adequacy of the data for the research questions.

The subjects were individually briefed about the nature of the study and their involvement in the study was fully explained to them. Involvement in the Study was absolutely voluntary. Consent was obtained from the subjects before they could participate in the study. Ethical approval was obtained from the Regent Business School, and authorisation to conduct the study was granted through the Southern African Maritime Port where the study was conducted.

In addition, the research process involved: the administration of the interview schedules, collection of interview schedules, data analysis, and how to ensure validity and reliability. Each subject was approached individually, and the researcher interviewed him/her based on the interview schedule questions. The interviews were conducted in a private office at the on-site occupational health clinic, with no outsiders present, and where people could feel that their confidentiality was not compromised. Since the interviewer was a male, female participants were first asked if they were comfortable with being alone with the male interviewer in the interview room or if they needed a female observer to be present during the interview.

After each interview, the researcher scrutinised the responses, and after becoming familiar with the responses from the subjects, the researcher inductively identified the key issues, concepts and themes. The phenomena observed were grouped into conceptual categories. The next stage of analysis involved re-examination of the categories identified to determine how they were linked. Key points mentioned by the interviewee were restated at the end of each session to ensure correct interpretation.

In addition, the researcher presented written accounts of his own conclusions to the interviewees for them to verify the content. This form of triangulation could be a source of new interpretations that have not occurred to the researcher.<sup>[8]</sup> After having recorded each subject's responses the researcher collected and kept the interview schedules in a lockable safe with controlled access.

Although the interview is an excellent technique for gath-

ering certain kinds of research information, interviewer bias is greatest in face to face interview because the interviewee may be influenced by the interviewer's appearance, tone of voice, and wording of the questions. Qualitative research using semi-structured interviews will not be able to be used to make generalisations about the entire population where this is based on a small and unrepresentative number of cases.<sup>[8]</sup>

A qualitative research approach through the use of semi-structured interviews on a small sample of 15 employees enabled the researcher to obtain descriptive rather than predictive results. Although qualitative research may be undermined by the subjectivity of the researcher and poor reliability of the results, it has greater validity because it can assist the researcher in finding out why things are the way that they are, as well as aid in understanding the barriers and opportunities for change.

## Results

The findings and analysis is presented as themes and sub-themes emerging from this study, as presented in Table 1. It is noteworthy that in both the pilot and research studies, none of the respondents agreed to be audio-taped. The findings were therefore based on interview notes and summaries. The major themes of this study were: lost work time, employee morale and workforce productivity. The sub-themes that linked these themes were classified into three categories. The first category included the following: the onsite occupational health clinic has been effective in reducing lost work time, the on-site occupational health

**Table 1.** Results sheet

Results Sheet		
Themes	Participant responses	Example of responses
<b>Lost Work Time</b>		
Reduction	10	It has helped me to reduce my absenteeism.
No reduction	3	The clinic has not really done anything for me in terms of my attendance.
Uncertain	2	I cannot be sure how it has impacted on my attendance.
<b>Employee Morale</b>		
Improvement	10	It is great to know that we are cared about within the company. I am happy about that.
No improvement	3	The nursing sister cannot speak Zulu, and this makes it difficult for us to communicate and understand each other. That leaves me not satisfied when I leave the clinic.
Uncertain	2	I am not sure if the clinic can do much in terms of my wellbeing if I do not make a choice about how I want to feel.
<b>Workforce Productivity</b>		
Improvement	10	It is of benefit because it protects and improves the health of employees so that they can work better and be productive.
No improvement	3	... No positive impact because the clinic is not known by many employees.
Uncertain	2	I think we can only determine that in the long term because the clinic has been there for just over a year now.

clinic has been effective in improving employee morale, and the on-site occupational health clinic has been effective in improving workforce productivity. The second category included the following: the on-site occupational health clinic has not been effective in reducing lost work time, the on-site occupational health clinic has been effective in improving employee morale, and the on-site occupational health clinic has been effective in improving workforce productivity. The third category was uncertainty about the effectiveness of the on-site occupational health clinic on lost work time, employee morale and workforce productivity.

### Characteristics of Respondents

The respondents from the research study comprised 53.33 per cent female employees and 46.67 per cent male employees. Eighty per cent of the respondents were blue collar employees, and 20 per cent were white collar employees as reflected in Figure 1.

In the context of this study, “blue collar” employees can be described as those employees whose job functions are either technical or operational. “Blue collar” employees’ work environment is largely based at the quayside or outdoors, and they wear personal protective equipment such as hard hats, goggles, respirators, safety shoes and overalls during their normal work. “White collar” employees can be described as those employees who are based in offices, and they are expected to wear formal or semi-formal clothes during their normal work. “White collar” employees’ work is largely administrative.

### Lost Work Time

#### Reduction in Lost Work Time

The results indicate that 66.67 per cent of the respondents perceived the on-site clinic as having been effective at reducing lost work time. The respondents who perceived the on-site occupational health clinic favourably felt that the

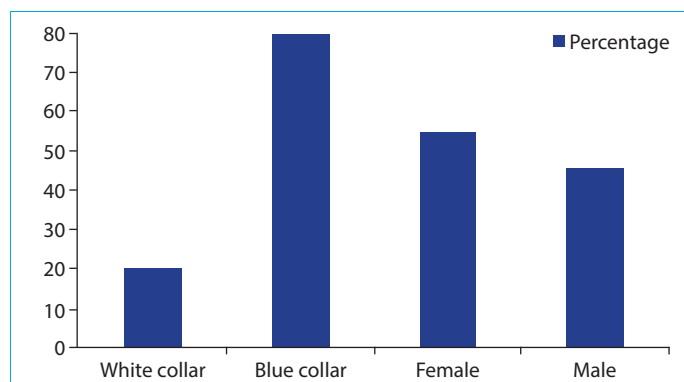


Figure 1. Characteristics of respondents.

proximity of the on-site clinic to the worksite encouraged employees to utilise the clinic more rather than seek health-care externally. They felt that this decreased lost work time.

*“The three times that I have attended the clinic have ensured that I was not absent from work unnecessarily. I just had to come to work and attend the clinic and go back and continue with my work, because the clinic is just a short walking distance from my worksite.”*

#### No Reduction in Lost Work Time

There were 20 per cent of the respondents who perceived the on-site clinic as not having been effective at reducing lost work time. The respondents who perceived the on-site occupational health clinic as not being effective, have cited lack of signage and the fact that the on-site clinic was not well marketed as the main reasons for it not making any impact on lost work time.

*“I have already highlighted earlier that my main concern is the lack of signs to help someone to easily locate the clinic.”*

Poor utilisation of the on-site clinic was also perceived as being due to lack of confidentiality at the on-site clinic, and the fact that there was a communication barrier between the on-site clinic staff and the employees. As a result many employees have continued utilising external health clinics or private health practitioners who often book them off from work. Another response was that the service was slow at the on-site occupational health clinic, and this caused time delays at the operational area.

*“... When we are in a hurry to go back to work, the nurses do not seem to understand that we are running late. They must first help those of us who are in a hurry and deal with those employees that are not in a hurry later. The supervisors only give us a specified time off to attend the clinic, and if we spend an extended time at the clinic then we could be in trouble with the supervisors...”*

#### Uncertainty About Effectiveness on Lost Work Time

Only 13.33 per cent of the respondents were uncertain about the effectiveness of the on-site occupational health clinic’s effectiveness on lost work time. The main factor for the uncertainty was that some of the respondents had a good attendance at work, and the fact that the on-site occupational health clinic was still relatively new and it was difficult to ascertain whether it had made an impact on lost work time or not.

*“I do not think I am in a position to answer that question because I hardly get ill and I always come to work. Even if I am exhausted, I always make an effort to come to work.”*

## Employee morale

### Improvement in Employee Morale

There were 66.67 per cent respondents who perceived the on-site occupational health clinic as having improved employee morale. The main reasons that were cited for the positive impact of the on-site clinic on employee morale included the good quality of service at the clinic, the proximity of the on-site occupational health clinic, and the sense that the on-site clinic made them feel cared about at the workplace.

*"The fact that there is a clinic at work gives me some assurance. Even if I do not feel like coming to work due to my serious ... pains, I know that if I come to work I have immediate assistance. It is motivating to come to work with the knowledge that the clinic will attend to my health problem."*

*"The clinic nurses and doctor are very friendly not only at the clinic but also outside the clinic. They are truly concerned about the wellbeing of people. They do not show signs of stress even when they are under pressure."*

### No Improvement in Employee Morale

There were 20 per cent respondents who did not perceive the on-site clinic as having improved employee morale. The lack of confidentiality at the clinic and the communication barrier between the employees and the clinic staff were the main factors that the respondents cited as having had a negative impact on employee morale. Other factors that made some of the respondents unhappy were that the on-site occupational health clinic did not cater for casual or non-permanent employees, that the on-site occupational health clinic service was not available at all times or when employees needed it the most, and that the on-site occupational health clinic runs out of medicine.

*"Perhaps I can say they need to do something about the privacy. When employees are at the clinic, they are examined in an open area where other patients can see or hear the conversation between the nurse and the employee."*

*"... But my main problem is the language. The nurse cannot speak isiZulu, and we struggle to communicate and understand each other. That leaves me not satisfied when I leave the clinic."*

*"I do not like the fact that the clinic excludes casual employees. Casual employees are also exposed to the same health hazards as permanent employees, and yet nobody cares about them. I don't like it that the clinic is not open during the night shift."*

*"I do not like it when it is closed when you need it the most, especially during the night and on weekends."*

*"I have used the clinic only once, and I was not impressed by*

*the fact that they said most of the tablets and medicine had run out of stock. I was also not happy that I was prescribed tablets without having being examined or diagnosed. I do not think I will use the clinic again, unless there is drastic improvement in their service."*

### Uncertainty About Effectiveness on Employee Morale

There were 13.33 per cent respondents who were uncertain about the effectiveness of the on-site occupational health clinic on employee morale. The main reason for the uncertainty was that it was difficult to tell whether the on-site occupational health clinic had made any impact on employee morale or not because employees make choices about how they want to feel regardless of whether there is an on-site occupational clinic or not.

*"I am generally a person who takes life positively. So, I am not sure if the clinic can do much in terms of my wellbeing if I do not make a choice about how I want to feel."*

## Workforce Productivity

### Improvement in Workforce Productivity

The results show that 67.67 per cent of the respondents perceived the on-site occupational health clinic as having improved workforce productivity. The main reason given by the respondents was that the on-site occupational health clinic had added value to the business by keeping employees healthy and enabling them to be at work when they are supposed to be at work and helping the firm generate profits.

*"It is adding a lot of value to the business because when employees feel that the company cares about them, their spirits are also high, and this boosts their performance and company profits."*

*"If the clinic was far away, time would be lost when we walk far. When time is lost while we are at work, this causes delays and the company is charged for any delays. When the company is charged by customers for the delays, the profit is affected."*

### No Improvement in Workforce Productivity

There were 20 per cent respondents who perceived the on-site occupational health clinic as not having improved workforce productivity. The main reason given by the respondents was that there were no signs to locate the clinic, and this could indicate that many employees were not even aware that there was an on-site occupational health clinic.

*"I have already highlighted earlier that my main concern is the lack of signs to help someone easily locate the clinic. I can say that a lot of employees do not even know that there is an on-site occupational health clinic. The clinic is therefore not making an impact on employees' productivity in this company. If an employee was performing badly before the clinic, he/she is*

*possibly still performing badly, no improvement."*

### **Uncertainty About Effectiveness on Workforce Productivity**

There were 13.33 per cent respondents who were uncertain whether the on-site occupational health clinic had or had not improved workforce productivity. The main reason given by the respondents was that it was still too early to tell.

*"I am not sure. It is still too early to tell. Maybe after two years I will be certain as to whether the clinic has added any value to the business and to employee productivity or not."*

The three major themes that ran through the core of the study were lost work time, employee morale, and workforce productivity. These three themes were linked by the following sub-themes: effectiveness of the on-site occupational health clinic on improving lost work time, employee morale, and workforce productivity; no effectiveness of the on-site occupational health clinic on improving lost work time, employee morale, and workforce productivity; and uncertainty about the effectiveness of the on-site occupational health clinic on lost work time, employee morale, and workforce productivity. In the next chapter a discussion of the findings from this study is presented.

## **Discussion**

### **Lost Work Time**

#### **Reduction in Lost Work Time**

The majority of the respondents were happy with the proximity of the on-site occupational health clinic to the operational area. Most of the respondents indicated that the proximity of the on-site occupational health clinic has made a significant difference in terms of reducing absenteeism. In addition to its proximity, the expanded variety of healthcare services provided at the on-site occupational health clinic indicates that employees are encouraged to come to work rather than seek healthcare from external or community healthcare services. Sherman and Cooper corroborate that all these offerings help to keep employees on the job and functioning in their optimal capacity.<sup>[4]</sup>

It is highlighted by another study that on-site clinics are helping transform the face of healthcare by saving considerable time.<sup>[9]</sup> Studies indicate that when on-site screening leads to the early identification and successful treatment of chronic diseases such as diabetes and hypertension, it can prevent serious complications and extended lost work days later. Curran et al.<sup>[3]</sup> acknowledge that chronically ill patients were four times more likely to use the on-site clinic for primary medical care than a community resource and that those patients exhibited:

- More primary care visits than those using community-based resources-24 per cent more total office visits per year
- Fewer hospitalisations than those using community-based resources-inpatient admission rate reduced by 50 per cent
- Less hospital use than those using community-based resources-hospital outpatient visits reduced by 42 per cent
- Less need for referral to specialist than those using community-based resources-community office visits were reduced by 36 per cent
- Fewer prescriptions from retail pharmacies compared to those using community-based resources

It can be discerned from this study and from a study by William Gallagher Associates that cost-savings will come from employees using healthcare when they need it instead of waiting too long and needing to take time off to recover or returning to work too quickly.<sup>[10]</sup> It should be noted that factory managers also confirmed that the availability of health services made them less likely to be absent or to look for jobs elsewhere. Although the study could not quantify these responses, they suggest additional savings, since replacing managers is more expensive for the factory than replacing line workers.<sup>[11]</sup>

#### **No Reduction in Lost Work Time**

The 20 per cent of respondents who perceived the on-site occupational health clinic as not having improved lost work time were influenced by a number of factors, including: lack of visibility of the on-site occupational health clinic, lack of confidentiality at the on-site occupational health clinic, a communication barrier between the nurse and the employees, and the slowness of the on-site occupational health clinic staff. All these factors prevented or discouraged some employees from utilising the on-site occupational health clinic.

When employees are prevented or discouraged to use the on-site occupational health clinic, it is expected that they will seek healthcare externally. When employees consult healthcare professionals at external healthcare services, they are often booked off even for minor illnesses that could have been attended to at the on-site occupational health clinic. Sometimes extended sick leave may be a result of serious illnesses not being picked up early. Both the short-term and long-term sick leave will result in lost work time. Weir warns that employers need to understand that time away from work costs a company seven times as much as the actual medical cost for services rendered.<sup>[12]</sup>

Another concern was that the clinic only operated from eight o'clock in the morning to four o'clock in the after-

noon, and as a result employees who work night shift could not access the clinic service. Judging from the incident reports of the local branch of the Southern African Maritime Port, most accidents or injuries on duty happen during the night. Emergencies or incidents that are not well attended to may result in increased lost work time, due to them not being attended to or monitored at the on-site occupational health clinic. This shows that the on-site occupational health clinic's service is needed the most during the night shift. The firm needs to address this issue as a matter of urgency.

It would seem that there is a need for the Southern African Maritime Port's leadership to amend the on-site occupational health clinic's contract to be flexible with establishing hours of operation in order to meet the needs of workers whose work is on a three-shift system. Takala affirms that the management of the enterprise or organisation has the key role to play in this regard.<sup>[13]</sup>

### **Uncertainty About Effectiveness on Lost Work Time**

There 13.33 per cent of respondents who were uncertain whether the on-site occupational health clinic had or had not improved lost work time, highlighted that it was still too early to determine the effectiveness of the on-site occupational health clinic on lost work time.

The uncertainty was possibly influenced by the fact that the on-site occupational health clinic was still a first at the Southern African Maritime Port. Whenever there is change, it is expected that some people will initially be cautious about whatever is being implemented. Being cautious about something that has been implemented for just over a year makes sense to a certain degree. The important thing is the sustainability of the on-site occupational health clinic.

Nevertheless, it makes sense to evaluate an on-site occupational health clinic after one year to determine its effectiveness. This will assist in diagnosing problems early.

### **Employee Morale**

#### **Improvement in Employee Morale**

It is noteworthy that the majority (66.67 per cent) of the respondents perceived the on-site occupational health clinic as having improved employee wellbeing or morale. The factors that were highlighted were the good quality of service at the on-site occupational clinic, the proximity of the on-site occupational clinic, and the general feeling that the employees were being cared about at the workplace.

In line with Maslow's hierarchy of needs, this study suggests that individuals at the workplace look for health and safety first and its presence can be a great motivator. Despite the limitations of this study, the results suggest that

it was forward-thinking for the local branch of the Southern African Maritime Port to have an on-site occupational health clinic. The on-site occupational health clinic's main purpose is to ensure that occupational health hazards are recognised, assessed and controlled. Burton recognises the importance of the physical work environment to employee morale.<sup>[15]</sup>

This indicates that the psychological work environment has a key role to play in employee morale. This point is affirmed by Lochhead who observes that the ownership and employees at Pazmac are proud of their work environment, and believe that it contributes to employee dedication and manufacturing excellence.<sup>[15]</sup>

Meswani reports that forward-thinking organisations recognise that managing their people is just as important to success as control of financial and capital resources.<sup>[16]</sup> Organisations can improve the current and future health and success of their enterprise by developing a healthy culture and adopting a systematic approach to occupational health.

#### **No improvement in employee morale**

The 20 per cent respondents who perceived the on-site occupational health clinic as not having improved employee morale strongly cited the lack of confidentiality at the clinic, and the communication barrier between the clinic nursing sister and employees. It was expected that some of the blue-collar employees could have a problem communicating in English with the on-site occupational health clinic nursing sister, given the low literacy level of the majority of employees at the Southern African Maritime Port. The majority of employees at the Southern African Maritime Port can only communicate in Zulu. Although blue collar employees comprised 80 per cent of the study sample, only 20 per cent raised the communication barrier as a major issue. This shows that there was some level of understanding between the on-site occupational health clinic nursing sister and the majority of the blue collar employees who responded in this study.

However, the fact that some of the respondents negatively perceived the communication barrier and the lack of confidentiality at the clinic implies that this had a negative impact on trust and employee morale. The confidentiality issue in this study is contrary to the findings of a study by Weir.<sup>[12]</sup> Weir's finding was that if a third party is used to run the clinic, it can lessen concerns about confidentiality issues that employees may have.<sup>[12]</sup>

It is concerning that the firm had an oversight by employing a nursing sister who could not communicate with employees in their language. This could potentially impinge

on trust and have a negative impact on employee morale, utilisation of the clinic, and productivity.

Once there is lack of trust, employees may end up perceiving the on-site occupational health clinic as serving the interests of management. The danger is that the lack of trust about the on-site occupational health clinic at the Southern African Maritime Port could easily rub-off on employees that had never even used the clinic. Once the lack of trust and low morale about the on-site clinic spreads throughout the workplace, it can be expected that the spirits of the employees could plummet.

This view is affirmed by studies indicating that occupational health providers have been accused of being an advocate for employers' rights. Such accusations have created tension between health providers and their patients. To address this, occupational health clinics are making considerable efforts to establish, and maintain trust between all parties.<sup>[17]</sup>

Employees want proper attention. This is evident in this study whereby some of the respondents were not happy with the long queues at the on-site occupational health clinic the clinic staff seemed to always work under pressure to attend to the large number of employees who attend. The employees possibly felt as if they were just a number there. However, some of the respondents were very pleased with the service they got from the nurse and the doctor at the on-site occupational health clinic at the Southern African Maritime Port. Employees can easily see when the clinic nurses or doctors do or do not give them proper attention.

Welch indicates that when a company unveils a new plan to rein in health-care costs, workers usually groan, yet Toyota Motor is getting rave reviews for the on-site medical centre it built at its truck factory in Sao Antonio.<sup>[18]</sup> "I saw the doctor for 20 minutes," Aguilio beams. "You're not just a number there."

Although the majority of respondents felt that the proximity of the on-site clinic gave them a sense of confidence that the firm cared about their wellbeing, it cannot be ignored that very few respondents expressed a concern about the exclusion of non-permanent employees from receiving care at the on-site occupational health clinic. It can be discerned that these respondents felt that the Southern African Maritime Port's management treated non-permanent employees as outcasts. This may affect the morale not only of the casual or non-permanent employees but of the permanent employees as well.

In this regard, the Southern African Maritime Port may be in danger of not being able to attract and retain key people. The organisational benefit of happy employees is that it may liberate the full energy and attention of employees,

through attracting, retaining and motivating key people. If the firm does not address the issue of not caring about non-permanent employees, promptly, this issue may escalate and negate whatever positive impact the on-site occupational health clinic may have. Once the morale of employees has been affected, employee wellbeing and productivity may suffer. Well for Life affirms this point by indicating that the gains of employee wellbeing are measured in improved employee morale and gains in productivity.<sup>[19]</sup>

Burton indicates that the same management practices that lead to employee wellbeing also lead to high employee morale, reduced time lost at work and a healthy bottom line.<sup>[20]</sup>

### **Uncertainty About Effectiveness on Employee Morale**

There were 13.33 per cent respondents who were uncertain about the effectiveness of the on-site occupational health clinic on employee morale. The uncertainty was largely influenced by the fact that these few respondents were generally self-motivated individuals, and the presence or absence of an on-site occupational health clinic did not mean much to them. The common thread that ran through their responses was that they had never been absent from work, even if they felt ill, they would come to work, because they liked their job.

Although this may seem contrary to Maslow's hierarchy of needs, it has to be recognised that employees are unique individuals that are motivated by different things. According to Muller et al. there are three sets of factors that influence motivation, namely individual traits, attributes of the job, and attributes of the job environment.<sup>[21]</sup>

## **Workforce Productivity**

### **Improvement in Workforce Productivity**

The study indicates that the majority (66.67 per cent) of respondents perceived the on-site occupational health clinic as having improved employee productivity. The common thread that ran through the responses was that the on-site occupational health clinic had added value to the business by keeping employees healthy so that they could be at work when they are supposed to be at work, thereby enhancing productivity.

### **No improvement in Workforce Productivity**

The 20 per cent respondents who perceived the on-site occupational health clinic as not having improved workforce productivity mainly cited the reason that the clinic was not easy to locate and was therefore, not utilised by many employees. This suggests that these respondents virtually



perceived the on-site occupational health clinic as a 'white elephant'.

Although the respondents who negatively perceived the on-site occupational health clinic formed a minority in this study, the leadership or management at the Southern African Maritime Port should be concerned. It just shows that the implementation of the on-site occupational health clinic was not systematically done at the Southern African Maritime Port. It seems as if the implementation of the on-site occupational health clinic was hastily done without having first prepared the ground. It really raises many questions when employees claim that they do not even know where the on-site occupational health clinic is located. On the one hand, this could imply that the respondents were just making an excuse, but on the other hand this could be true that the on-site occupational health clinic was difficult to locate.

Judging from the fact that the current location of the on-site occupational health clinic was still a temporary structure, perhaps the firm's leadership did not want to spend money on vigorously marketing a facility that would soon be abandoned. A permanent on-site occupational health clinic was still being built at another location within the Southern African Maritime Port. The bottom line is that the implementation of the on-site occupational health clinic should not have been rushed before the construction of the permanent on-site occupational clinic facility was completed. Using a temporary and poorly marketed on-site occupational health clinic could already have sent wrong messages to the employees that the firm did not care about them due to the perceived poor quality of the on-site occupational health clinic. Negative perceptions about the firm could seriously hamper workforce productivity.

Quality, or the lack of quality, affects the entire organisation. Burton observes that feelings of unhappiness magnify the effects of perceived stress on health. On the other hand, a sense of happiness is related to trust, which is the key to employer-worker relations, high morale, attendance and productivity.

Although it is not evident in this study that the Southern African Maritime Port's leadership have recognised the strategic role of an on-site occupational health clinic, it is encouraging that some studies report that corporate executives-particularly Human Resource personnel-have begun to appreciate the link between employee health and workforce performance and the need to provide programs that optimise workforce health and organisational productivity. Yet, a key service generally lacking in the so called workplace health and wellness approach is the strategic role that employee health can play in workforce productivity.<sup>[4]</sup> Although it is hard to track productivity, it is believed that quicker trips to the clinic, means less time missed.<sup>[22]</sup>

### **Uncertainty About Effectiveness on Workforce Productivity**

The 13.33 per cent respondents who were uncertain about the effectiveness of the on-site occupational health clinic on workforce productivity were mainly influenced by the fact that the on-site occupational health clinic was just over a year old, and they felt it was still too early to determine its effectiveness. Moreover, these respondents were unsure how the presence or the absence of an on-site occupational health clinic could influence their productivity.

It can be discerned that these respondents were the self-motivated type of employees who had a good attendance record and liked their job. The presence or absence of an on-site occupational health clinic did not mean anything to them in terms of their productivity at the workplace.

It can be concluded from the foregoing discussion that the on-site occupational health clinic was predominantly perceived positively by the respondents with regard to lost work time, employee morale and workforce productivity. The minority of negative responses cannot be ignored because they could nullify whatever positive gains the on-site occupational health clinic might have.

## **Conclusion**

### **Findings From the Literature Review:**

#### **Significance of the Psychological Contract in Organisational Health**

It can be discerned from Maslow's hierarchy of needs that an individual at a workplace looks for health and safety first and its absence can be a serious de-motivator. This corroborates the findings of this study because the respondents who perceived the quality of the environment and service of the on-site occupational health clinic as being good also felt that the firm was caring about the employees. On the other hand, those respondents who perceived the quality of the environment and service of the on-site occupational health clinic negatively also did not feel that the firm cared about its employees. Effectiveness of the on-site occupational health clinics should therefore not just be narrowed down to financial terms, but must take into consideration the perceptions of the employees as well, as the psychological contract has a significant influence on the performance of the business.

#### **Leadership Commitment to Employee Health and Wellness**

Although studies indicate that through outsourcing turn-key occupational health clinics, the employer is able to effectively transfer most of the general liability and medical

malpractice risk associated with worksite clinics; this does not take away the importance of the firm's leadership commitment to employee health and wellbeing, and systematic implementation of the health services. Mere implementation of worksite health care services without proper planning from the outset is not the answer for the attainment of employee wellbeing and organisational success.

The best practice is about managing the journey rather than the destination. The approach taken by the Southern African Maritime Port cannot be considered as the best practice because there was no proper consultation and no feasibility study conducted before the on-site occupational health clinics were implemented. Perhaps, as a knee-jerk reaction to the worsening absenteeism rate and the global economic downturn affecting the firm's bottom line, the Southern African Maritime Port was given a deadline by the firm's Head Office to urgently set up an on-site clinic without there being adequate capacity, facilities, resources, and a sustainability plan in place, at the time.

The practice of managing the journey rather than announcing the destination has been evident at Pazmac Enterprises Ltd., a leading provider of precision Computer Numeric Control (CNS) machining services, catering to clients across North America in a diverse range of industries, from aerospace to telecommunications. The most obvious indication of Pazmac's commitment to workplace health and wellbeing was the considerable resources expended in building a work environment dedicated to employee well-being. Pazmac's business' strategy was guided by owner Steve Scarlett's deeply held philosophy of treating employees, customers and suppliers the way he himself would like to be treated.

### Central Shared Values of the Company

Trust, respect, and open and honest communications with employees are central shared values of the company. Both the ownership and employees at Pazmac are proud of their work environment, and believe that it contributes to employee dedication and manufacturing excellence.<sup>[15]</sup>

### Systematic Implementation of On-Site Clinics

The literature reviewed in this study recognises that a systematically implemented on-site occupational health clinic could enhance the prevention and management of accidents and diseases at the workplace.

### Impact of Employee Health on the Business

While the clinic's success is reflected in its rate of use, the management of the enterprise or organisation has the key role, in this regard. Improving the health of employees has a positive impact on working conditions, productivity and

economic and social development. It can be concluded that the effectiveness of onsite clinics is largely related to their convenience and to the trust they are capable of engendering in the employees they serve.

### Findings from the Primary Research:

The results from the research study indicate that 66.67 per cent of the respondents perceived the on-site occupational health clinic as being effective in reducing lost work time, employee morale, and workforce productivity. There were 38.7 per cent respondents who perceived the on-site occupational health clinic as not being effective in reducing lost work time, employee morale, and workforce productivity. Only 13.3 per cent of the respondents were uncertain about the effectiveness of the on-site occupational health clinic.

### Conclusions

The objectives of this study were:

- To determine if an on-site occupational health clinic reduces lost work time
- To determine if an on-site occupational health clinic improves employee morale
- To determine if an on-site occupational health clinic improves workforce productivity
- To make recommendations to the management of the Southern African Maritime Port in order to develop a health strategy that will align better with the needs of employees as well as the organisational and operational goals of the firm.

The conclusions will be discussed according to the objectives listed above:

### Lost Work Time

In line with the qualitative nature of this study, the perceptions of the respondents were explored to determine how the respondents felt about the impact of the on-site occupational health clinic on the organisation's lost work time. The proximity of the on-site occupational health clinic and the expanded variety of healthcare services provided at the on-site occupational health clinic seemed to encourage a majority (66.67 per cent) of the respondents to come to work more rather than seek healthcare from external or community healthcare resources. When employees utilise an on-site healthcare service more rather than seek healthcare externally, it is expected that the organisation's lost work time will be reduced.

The poor visibility of the on-site occupational health clinic, lack of confidentiality, and the communication barrier between the on-site occupational nursing sister and the employees seemed to prevent or discourage 20 per cent of the

respondents from utilising the on-site occupational health clinic. When employees seek healthcare externally rather than utilise an on-site healthcare service, it is expected that the organisation's lost work time will be increased.

The 13.33 per cent of respondents could not indicate whether the on-site occupational health clinic had an impact on the organisation's lost work time or not. They felt that it was still too early to determine impact of the on-site occupational health clinic after it had only been in operation for just over a year.

### **Employee Morale**

The majority (66.67 per cent) of respondents seemed to be happy and motivated to come to work as a result of the proximity of the on-site occupational health clinic, good quality of service provided by the on-site occupational health clinic's staff, and the general feeling that they felt being cared about at the workplace. When employees are happy and motivated by the employer, it is expected that their morale will be improved.

The 20 per cent of the respondents seemed to be unhappy about the lack of confidentiality at the on-site occupational health clinic, the communication barrier between the on-site occupational health clinic's nursing sister and the employees, and the exclusion of non-permanent employees from receiving care at the on-site occupational health clinic. The danger is that such unhappiness may lead to low employee morale.

The remaining 13.33 per cent of the respondents seemed to be unsure about the impact of the on-site occupational health clinic on employee morale. They felt that it was still too early to determine the impact of the on-site occupational health clinic on employee morale.

### **Workforce Productivity**

The majority (66.67 per cent) of respondents seemed to believe that the on-site occupational health clinic improved workforce productivity by keeping employees healthy so that they could be at work when they are supposed to be at work.

The 20 per cent of respondents seemed to believe that the difficulty in locating the on-site occupational health clinic meant that not all employees were aware where the clinic was. This means that the on-site occupational health clinic did not improve workforce productivity.

The 13.33 per cent respondents seemed to be uncertain about the impact of the on-site occupational health clinic. They felt that it was still too early to determine the clinic's effectiveness on workforce productivity.

### **Recommendations**

The following recommendations are suggested in order to enhance the effectiveness of the on-site occupational health clinic at the Southern African Maritime Port.

#### **Lost Work Time**

There needs to be a proper marketing and communication plan to ensure that the on-site occupational health clinic is known by all employees, to encourage utilisation of the on-site occupational health clinic rather than external healthcare services. Proper signage should be used to ensure that the clinic is easy to locate, so that time is not wasted when employees visit the clinic for the first time. The maintenance of employees' confidentiality and privacy should be adhered to, to ensure that employees are encouraged to utilise the on-site occupational health clinic rather than seek healthcare externally. The on-site occupational health clinic nursing sister must make an effort to learn the vernacular language of the area where the on-site occupational health clinic is located. This will encourage employees to utilise the on-site occupational health clinic rather than external healthcare resources.

#### **Employee Morale**

The leadership of the Southern African Maritime Port must make sure that employee confidentiality is maintained at the on-site occupational health clinic to ensure that employees develop trust in the on-site occupational health clinic. A bilingual or multi-lingual on-site occupational health nursing sister should be employed, to ensure that there is effective communication between her and the employees. The on-site occupational health clinic needs to be reviewed to ensure that non-permanent employees are also allowed to access healthcare at the on-site occupational health clinic. This will assist in improving the employee morale.

#### **Workforce Productivity**

The on-site occupational health clinic should be promoted through the involvement of various stakeholders at the firm to ensure that it adds sustainable value to the business. Workforce productivity will be enhanced when employees feel that they have been involved in the process of change, such as the implementation of an on-site occupational health clinic.

#### **Systematic Approach for Implementation and Sustainability**

It is recommended that a systematic approach be followed in order to successfully implement and sustain the on-site occupational health clinic at the Southern African Maritime

Port. The following steps should be followed:

- **Joint health strategy committee:** Joint management and union representatives of the Southern African Maritime Port should meet to discuss the creation of the on-site occupational health clinic to ensure that employee health is aligned with the core business strategy.
- **Appointment of an occupational health and wellness coordinator:** A health and wellness coordinator should develop an occupational health plan for the Southern African Maritime Port, including the appointment and development of a worksite occupational health and wellness liaison. The worksite liaison should assist the national occupational health and wellness coordinator based at the firm's Head Office, in understanding worksite culture and determining how to best implement the local occupational health on-site clinic.
- **Creation of local health committees:** Each worksite occupational health and wellness liaison should facilitate the formation of a local joint health committee to oversee the implementation and monitoring of the effectiveness of the local on-site occupational health clinic. The local committee should ensure that an appropriate site is identified for the location of the on-site occupational health clinic. The local committee should also ensure that the outsourced on-site occupational health clinic hires bilingual and culturally competent clinic staff, bearing in mind the dynamics of the Southern African Maritime Port.
- **Visibility of the occupational health programme:** The local health committee should develop a culturally competent marketing plan to make workers aware of the on-site occupational health clinic. The recruitment and training of as many promoters as possible from the firm's workforce should ensure that the occupational health and wellness programme is visible to the target population. Continually promoting the programme is crucial for sustainability.<sup>[23]</sup>

### The Firm's Mission and Values

In addition to the micro-steps best practice approach mentioned above, it is recommended that the on-site occupational health clinic should do much more than reduce healthcare costs for the firm; it should bring the firm's mission and values to life.

The firm's passion should be to make the right connections to drive optimal health outcomes, so it makes sense for the firm to offer an on-site occupational health clinic that will provide quality, convenience and efficient care to employees and their families. By implementing these solutions, administrative hassles will be eliminated and employees' time

will be saved, thus leading to increased productivity.<sup>[24]</sup>

### Integrated Approach

It is important to integrate occupational health and safety, workplace wellness, work-family, with other human resource management initiatives. A coordinated approach will increase the likelihood that change barriers are removed, and that the underlying organisational and work environment determinants of wellness and employee performance are addressed. Strong leadership on all these issues, supportive supervisors at all levels of the organisation, and a culture that highly values employees are the enabling conditions for creating healthy workplaces. Well-designed interventions to create healthy workplaces make a positive difference.<sup>[25]</sup>

### Implications for Research

Researchers must push far beyond their disciplinary boundaries if they are to contribute to meaningful changes in workplaces. The knowledge gaps and conceptual and methodological challenges of conducting health-related research in workplaces present a large future agenda. However, senior management and health practitioners involved in workplace health promotion and human resource management need not wait for new research to take action.<sup>[25]</sup>

This study sets the scene for future research studies that should focus on the following:

#### The competence of leadership in organisational health.

The importance of sustainable healthy workplaces represents a new direction for leadership, one that requires a healthy work environment, a healthy work culture and a healthy bottom line.

#### Leadership commitment to organisational health and safety.

Considering that the status of organisational health and safety is largely dependent on the priorities of the organisation's business' strategy, it is important that research be responsive to the concerns of the organisation's leadership.

#### The impact of workplace health on families and the community.

Researchers need to push beyond their disciplinary boundaries if they are to contribute to the understanding of the interrelationship between workplaces, families and the communities.

To conclude, there are also crucial implications of research on workplace health and productivity for workers. Where employees work can either nurture or compromise their health and overall wellbeing. As individuals, employees have relatively little influence, other than to quit. A healthy

workplace should not be a work reward or a negotiated condition, but a right of all workers. For many, this is a distant ideal.

What may swing the pendulum in that direction is a growing understanding of the positive relationship between healthy work environments and organisational productivity. In the emerging economy, this link may become a key ingredient for social and economic progress.<sup>[25]</sup>

### Disclosures

**Ethics Committee Approval:** The study was approved by the Local Ethics Committee.

**Peer-review:** Externally peer-reviewed.

**Conflict of Interest:** None declared.

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