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# An Appraisal of Safety Practices on Employees' Performance in the Housekeeping Department of Some Selected Hotels in Ghana

#### Elizabeth Kafui Senya\*

Department of Hotel Catering and Institutional Management, School of Applied Arts,
Accra Technical University, Ghana
[\*Corresponding author]

# Dzidzor Mensah Kplorlanyuie

Department of Hotel Catering and Institutional Management, School of Applied Arts, Accra Technical University, Ghana

#### Herberta Prebi

Department of Hospitality Management, Takoradi Technical University, Ghana

#### Abstract

A mixed-method approach and a descriptive cross-sectional research design were employed for the study. The population of the study comprises of all the housekeeping staff and management from the 82 star-rated hotels in the Accra Metropolis of Ghana. Purposive and Quota sampling techniques were employed to select hotels and respondents for the study. The advent of Covid19 has caused some of the hotels to temporarily shut down. Therefore, a total of 18 hotels were purposively selected for the study. The respondents were then selected using quota sampling technique from the various hotels, where a proportionate number of respondents were selected from each hotel based on their total number. The 200sample size consists of 140 employees from the housekeeping department and 60 respondents from management. Questionnaires were used as the main research instrument in sourcing primary data on the subject. The data were compiled and tallied using Statistical Package for Social Sciences (SPSS) version 22. Descriptive statistics such as mean and standard deviation were also used to explain variations in responses. The study concluded that employees at the housekeeping department are trained on safety practices, specifically in the sphere of health and safety trainings, stress management training, emergency procedures, and first aid equipment usage. The study also indicated that various forms of safety hazards/risks such as burns, muscular strains, bruises, sexual harassment, etc. have 'mild' impact' on the overall performance of the hotel. Indeed, activities in the housekeeping department is physically demanding and it is plunged with repetitive motion injuries, it is recommended that more male are employed in this department or more technological devices should be used in the housekeeping department in order to reduce the risk of suffering from back injuries and bodily posture-related ailments. It is once again recommended that, Management of lower-rated hotels should endeavour to put safety protocols in place to avert any form of safety risks/hazards. To the Ghana Tourism Authority, it is very paramount that they conduct frequent surprise supervision of hotels and sanction those that fail to ensure safety at their facilities.

#### **Keywords**

Safety, Practices, Employees' Housekeeping, Hotels, Accra

#### Introduction

Occupational safety and health is a discipline that aims at the development and preservation of the highest degree of physical, emotional, and social well-being of workers. It includes the defence of employees in their jobs from risks resultant causes, which are conflicting to their safety and health condition (Rajini, Fernando & Serapperuma (2012). If there are safety and health issues in a company, this can lead to specific issues and put the worker, their families, other people in the group and the physical environment outside the workplace at risk. Similarly, Whitner (2001) considered

occupational safety and health as a cross-disciplinary area concerned with protecting the safety and health of people engaged in work or employment.

A study reported that hazardous working conditions, inadequate training, and improper use of safety equipment cause injury, sickness, and even death, leads to a deteriorating standard of each worker 's results. It seems right to note that the risk factors, whether physical, chemical, behavioural, psychosocial, ergonomic, electrical and mechanical, have been given greater importance; it is worth noting that if they were to be better established, employers might remove or regulate these factors in turn (Álvarez & Faizal, 2012). In view of the loss of human and economic capital, the interest in these types of controls has increased to reduce accidents and it is necessary to commit to compliance with the rules laid down, since certain managers may try to avoid or neglect the problem and often rely on the legal fine-print that governs their country.

According to the International Code of Council (2003), a hotel is defined as any building comprising of six or more guest rooms intended or designed to be used or that are used rented or hired out to be occupied for sleeping purposes by guests. In a study conducted by Calvin & Joseph (2006), the various types of health and safety hazards that often took place in the hotel industry can be classified into physical, chemical, and mechanical. Physical hazards include noise, vibration, stress on heat and colds, unsafe use of kitchen equipment, electricity, and fire protection and lighting. Chemical risks include heavy metals, acids, bases, solvents, gases and highly reactive chemicals. In the study of Mill & Lin (2001), it emerged that hazards ensuing in physical hazards and accidents in the hotel sector can be narrowly classified as falling from heights, dropping objects, machine/tool operation accident, electrocution, fire/explosion, temporary structure failure and others (e.g. slipping on the same floor, oxygen shortage in confined spaces, etc.).

A study by Mill & Linn (2001) revealed that inadequate safety awareness, training, housekeeping and wilful transgression are the key causes of workplace health and safety deficiencies. Moreover, unsuitable equipment and work platform, incorrect safety mindset, lack of control and supervision, lack of proper procedure and guidance and time constraints are the causes of fall accidents (Wong, Chan, Yam, Wong, & Tse, 2007). Additionally, Haussanain (2009) found that open flames or smoking, arson, and cooking appliances were main explanations for hotel fires. He also argued that because of many factors, hotels may be considered a high-risk group of facilities for fire hazards. These factors are the high occupancy of the building particularly in banquet halls and conference centres, the increased fuel load present in hotel facilities, the lack of familiarity with the building, which leads to difficulties in finding a way out of the building in the event of emergency situations and the presence of high fire hazard zones.

Maintaining protection contributes to the dignity, knowledge and education of employees in the area of health care at work. Training would make the company avoid the tension and demoralisation that causes injury and ill health. And maintaining health and safety practises can help to avoid the overall expense of injuries and ill health related to work (Whitner, 2001). Recent work by Jackson, Fraser, & Ash, (2014), argued that, to improve safety measures at the workplace to ensure continuous labour productivity, every hotel needs to put in place pragmatic health and safety practices that will address workplace accidents resulting in injury and death of workers. In a more generic term, safety practice focuses on methods outlining how to perform a task with a minimum risk to people, equipment, materials, and work environment (Infrastructure Health & Safety Association [IHSA], 2020). IHSA, (2020) considered safety procedures as series of specific steps that guide a worker through a task from start to finish in a chronological order. Safety procedures are designed to reduce the risk by minimizing potential exposure (IHSA, 2020). However, the importance of this strategic role of safety practice in an organisation, especially in the hotel industry has generated debates in recent times (Jackson, Fraser, & Ash 2014).

According to Lye (2009), many hotels and restaurants unintentionally flout occupational health and safety rules; simply because much attention has not been paid to the issues of safety and overall wellbeing of employees in the hotel and this oftentimes result in increased staff turnover (as a result of an accident or unfavourable working environment for workers), fines and costly pay-outs to employees. Again, some researchers such as Clift (2005) have also suggested that many hotels practice health and safety measures on ad hoc basis resulting in a series of accidents, maiming, and causing the death of hundreds of workers. These activities oftentimes result in low productivity which causes profits to plummet. With the lack of attention to safety risks in the hotel industry it's important to investigate its impact on hotel's performance.

Therefore, the thrust of this research work is to assess the effectiveness of safety practices on employees' performance in the hotel industry with a special focus on the housekeeping department. This industry is selected simply because the operations in the hotel industry are multifaceted with numerous sub-departments of which many human resource managers lose sight of.

Prior to the advent of Covid19, the hotel has become one of the fastest growing industries in Ghana due to increase in per capital income and population growth in urban areas. Accra the capital of Ghana has experienced tremendous growth in the number and magnitude of hotel establishments over the past ten years leading to massive employment of staff into the hotel industry (GTA, 2019) According to the Mensah and Boakye (2023 there is no data on safety hazards/risks or accidents in the housekeeping department of hotels or the entire hotel industry. This makes it challenging to know the various forms of safety risks in the housekeeping department or any other department in a hotel facility and the measures and policy instrument required in curbing it. To this end, addressing any issue pertaining to safety risks and practices in the housekeeping department requires a thorough investigation on the issue at the hotel since there is no industry data or hotel-specific data on safety practices and risks in the hotel industry. This study therefore

deemed it prudent to examine the issue of safety in the housekeeping department in some selected hotels in Accra and its effect on employees' performance in the hotel industry and how it can be remedied.

Furthermore, Rajini et al., (2012) observed that, studies on safety practices at the workplace has largely focused on industries such as the mining and manufacturing industries that uses heavy machineries for their operations. However, the hotel industry specifically the housekeeping department has not been immune from safety risks and accidents which adversely affect employees' performance (Rajini et al., 2012). In a study conducted in Egypt, Ghazi (2015) for instance observed that the hotel industry is equally plagued with numerous safety risks and accidents such as fire, cuts, slips muscular strains, bleach, electric shock, harassment, crime, stress, and among others that affect the performance of employees. In assessing related studies on safety risks and occupational hazards, the researcher observed that studies on safety at the workplace and occupational hazards in the hotel industry in developing countries are limited with most of the studies being conducted in developed countries. Studies are however non-existent when it comes to the housekeeping department. It is therefore imperative to examine the concept of safety at the housekeeping department of a hotel. The purpose this study was to examine Safety Practices on Employees' Performance in the Housekeeping Department of Some Selected Hotels in the Accra Metropolis of Ghana. The study was guided by this research question - What are the safety practices in the housekeeping department of a hotel?

# LITERATURE REVIEW AND THEORETICAL UNDERPINNING

# The Concept of Health and Safety at the Workplace

Occupational health and safety has been described in a variety of ways by numerous researchers. World Health Organization (WHO) identified occupational health in 1995 to include occupational medicine, occupational hygiene, occupational psychology, safety, physiotherapy, ergonomics, rehabilitation, etc. Safety on the other hand means shielding people from physical harm. The International Occupational Hygiene Association (IOHA) typically describes occupational health and safety (OHS) as the science of anticipation, identification, assessment and regulation of hazards occurring in or from the workplace that could affect the health and well-being of workers, taking into account the potential effects on the surrounding communities and the general environment. ILO (2009) reiterates that, occupational health and safety is concerned with the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations.

Furthermore, Hall and Goodale (2007) proposed Health and Safety as conditions and factors that affect, or could affect the health and safety of employees or other workers (including temporary, and contract workers), visitors, or any other person in the workplace. Webb (2022) asserted that health as a state of optimal physical, mental and social well-being. It is not merely the absence of disease and infirmity. Occupational health and safety as contained in Encyclopaedia (1998) made it clear that job safety is the interrelationship between people and work, material, equipment and machinery, environmental and economic consideration such as productivity. These terms 'health and safety' are considered together in the occupational context. Lucas (2007) is of the view that workplace is a physical location in which work related activities are performed under the control of the organization. According to Hughes et al, (2008) health and safety considers the working environment in a company and comprises all factors that impact the safety, health, and well-being of employees. It includes environmental hazards, unsafe working conditions or processes, drug and alcohol abuse, and workplace violence.

For operational purposes this study adopted the definition of safety at workplace to include: the one where employers and employees team up to use a constant improvement process to protect and promote the health, reduction of safety risks and well-being of workers and the sustainability of the workplace. This can be done by considering the following prerequisites: health and safety concerns in the physical work environment; health, safety and well-being concerns in the psychosocial work environment including organisation of work and workplace culture; personal health resources in the workplace; and ways of participating in the community to improve the health of workers, their families and other members of the community (Hughes et al. (2008).

# **Housekeeping Department**

Housekeeping is the operating department of the hotel, responsible for the cleanliness, maintenance, aesthetics of the rooms, the public area, the back area and the surrounding area. The hotel survives the selling of rooms, food, drinks and other minor facilities such as laundry, health club spa and so on (Roberts, 2016). Roberts (2016) again noted that the purpose of all accommodation establishments is to provide their customers with a safe, appealing, comfortable and friendly atmosphere that provides value for money. Nothing sends a stronger message than the cleanliness of a hospitality service. No level of service, friendliness or glamour can match the feeling that the guest has when entering a spotless, tidy and conveniently organised room. Both the management and the guest consider keeping the place clean and in good order necessary for the hotel to have a reasonable price and to have a repeat business (Roberts, 2016). However, the process of keeping the hotel clean, tidy, and convenient for guests is quite a daunting one which comes with safety risks. Some of these risks comes from overexertion, poor posture, heavy lifting, slips, twisted back, harassment, etc (Roberts, 2016).

## **Importance of Maintaining Health and Safety**

More than 200 people are killed each year in work-related incidents and more than one million injured are killed for insufficient health and safety measures (Rajini et al., 2012). Rajini et al., (2012) again revealed that every year, more than

two million people suffer from illnesses caused by or exacerbated by, their work or work-related functions, in particular hospitality. Preventing work-related injuries and ill health at work is a main concern for everyone at work. Competent and efficient workers are valuable for the development and survival of the company. Maintaining health and safety is therefore very critical in preventing staff from being exposed to some sort of danger. Rajini et al., (2012) posited that, providing training vis-à-vis information on health and safety at the workplace will:

- enable employees are not injured or ill because of the job function they perform
- build and develop a positive and constructive health and safety culture, where safe and healthy job fulfilment becomes a second nature to everyone
- find better ways to improve health and safety conditions at workplace
- easily be able to cater to all health and security risk factors and issues
- fulfil your moral and legal duty to take care of any health and safety issues for your employees.
- contribute towards making your employees competent, aware and informed in taking care of health issues at workplace
- aid in avoiding the overall work-related accident costs and ill health.
- to assess the risks posed to employees and others hazards that exist in their workplaces and by their various work activities. Once the risks have been assessed then they should be recorded and control measures to reduce them to as low as reasonably practicable needed to be employed.

#### The ABC Theory of Safety

The ABC theory of safety management developed by Ackland (2013) aimed at simplifying causality and effect of safety risks at the workplace. The ABC are actually acronyms denoting Attitude, Behaviour, and Condition

**Attitudes:** Employee behaviour is arguably one of the greatest determinants in workplace safety, especially as employees interact amid a host of varying safety issues. The human behaviour thus plays a huge role in a task performed by an employee. The task can have a negative and a positive impact on connected to the person doing the specified task.

Not only does your work attitude affect how well you do your job, it also affects how safe you are when you do it. Positive people usually do well in the workplace because they have an open mind and understand the result of their actions. Negative people on the other hand, complain about everything including the need to practise protection. A individual with a negative attitude to work is less likely to care about the nature of the work they do or how they do it. A pessimistic attitude to work can lead to unhealthy work habits and accidents.

**Behaviour:** Workplace behaviour is all about feelings such as violence, pleasure, or sadness. Bad behaviour at the workplace, such as abuse at the workplace, is a significant work-related psychosocial threat with the potential to lead to ill-health of workers. There are two main health issues; poor mental and cardiovascular health. For instance, if a shop assistant supports a system of negative reviews on business, negative exposure in the workplace can lead to physical illness and psychological illness. The conduct of staff suggests poor cardiovascular health and a major impact of current exposure on the predictor of mental health problems. Bam! Bam! The downhill effect, not only on your company, but also on the staff. An effective HSE Officer needs the following types of skills:

- Technical support skills the ability to ensure the product or service are produced without risk
- Human Skills the ability to work as a leader under groups
- Connectional skills the ability to see everybody in the HSE cycle and how they are intergraded.

Conditions: Ackland (2013), clarifies that, the condition to follow or penalties is what happens after actions – reward or penalty. Past conditions are the influencers of potential actions. Most people do not want to suffer the consequences of their actions. When people understand and believe in future situations, behaviour is beginning to shift. For individuals, the motivating circumstances are different. The effect of the injury on them personally or on their families is significant. For others, losing their work or having a direct effect on their social life is more important and may contribute to behavioural improvement. The point is we're all driven differently. So, knowing our people's reasons for protection is becoming critical for long-term behavioural change. The following criteria are met throughout the project:

- Conceptual, design, construction, commission, modification and decommissioning phase.
- Typical hazards to identify should risk minimize
- Mechanical, electrical, structural, chemical, physical, and biological hazards (stresses)

# METHODOLOGY

#### Study area

Accra is the economic and administrative centre of the Greater Accra Region and acts as the anchor of the Greater Accra Metropolitan Area (GAMA), which is home to some 4 million people, making it the thirteenth largest metropolitan area in Africa (Parker, 2000). The City of Accra, coterminous with the Accra Metropolitan District, once comprised the entirety of Accra until the Ledzokuku, Krowor, La-Dadekotopon, Ablekuma North, Ablekuma Central, Ablekuma West, Ayawaso North, Ayawaso Central, Ayawaso West, Okaikwei North, and Korley Kottey, districts were carved out as

separate municipal districts. Accra covers an area of 225.67 km<sup>2</sup> (87.13 sq mi), of which the City of Accra covers 60 km<sup>2</sup> (23 sq mi) (Dakubu & Kropp, 1997). Figure 1 below depicts the map of Accra Metropolis and its catchment areas.

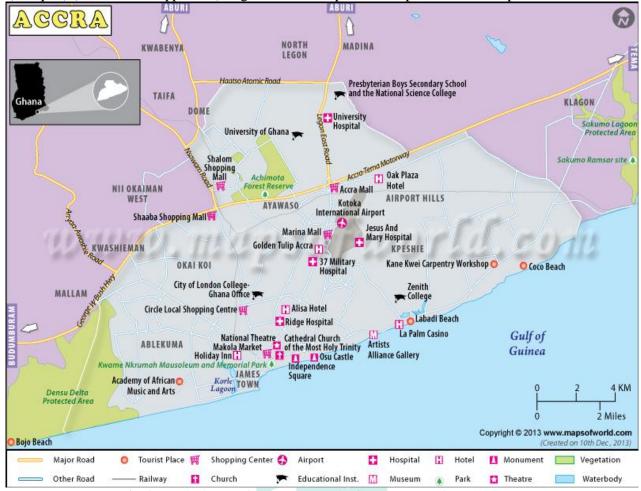


Fig. 1 Satellite image of Accra Metropolis (Source: Maps of World, 2020).

#### Research approach and Design

A mixed-method approach and a descriptive cross-sectional research design were employed for the study. The study adopting a mixed method incorporates the two approaches help in exhausting the subject of safety in the hotel space. Descriptive research design was used to collect relevant information on the issue of safety at the housekeeping department and also used to explain what exists in relation to the variables/constructs or conditions in a situation being investigated. The implementation of a descriptive research design provided an avenue for the researcher to get answers to the research question set out to guide the study, since the purpose of the study is to acquire and evaluate information on safety practises in hotel safety standards.

#### **Population of the study**

The population of the study comprises of all the housekeeping staff and management from the 82 star-rated hotels in the Accra Metropolis.

# Sampling, Research instrument and Data Collection

Purposive and Quota sampling techniques were employed to select hotels and respondents for the study. The advent of Covid19 which has caused some of the hotels to temporarily shut down. Therefore, a total of 18 hotels were purposively selected for the study. The major limitation that comes with the use of this limited number is the inability to make inferences about the population of interest. Nonetheless, findings from this study will provide hotels with useful information safety risks the study was deduced from the sample frame using the Raosoft sample size calculator which estimated 196 respondents as the sample size for the 398 employees and management staff from the 18 hotels. The 196-sample size was approximated to 200 respondents for the study. The respondents were then selected using quota sampling technique from the various hotels, where a proportionate number of respondents were selected from each hotel based on their total number. The 200-sample size consists of 140 employees from the housekeeping department and 60 respondents from management. Questionnaires were used as the main research instrument in sourcing primary data on the subject. The data were compiled and tallied using Statistical Package for Social Sciences (SPSS) version 22. In the process of data entry into the SPSS, information in the questionnaire were coded and entered into the computer for onward computation and estimation. Descriptive statistics such as mean and standard deviation were also used to explain variations in responses.

#### FINDINGS AND DISCUSSION

# Assessment of safety Practices of Employees' in hotels

This section presents findings and discussion on Safety practices of employees to help eliminate safety risks at the place of work. Table 1 below present the results on an assessment of safety practices in the selected hotels.

Table 1 Assessment of Safety Practices in Hotels

| Variables  | Frequency (N) | Percentage (%) |
|--|---------------|----------------|
| Have you been trained on any safety practices?           |               | _              |
| Yes  | 105           | 87.5           |
| No   | 15            | 12.5           |
| Total  | 120           | 100            |
| Safety area of Training                                  |               |                |
| Health and Safety trainings                              | 57            | 32.2           |
| Stress Management training                               | 15            | 8.5            |
| Preventive Maintenance on machinery/equipment            | 12            | 6.8            |
| Emergency/Safety Procedures to be used in each work area | 45            | 25.4           |
| First Aid Equipment                                      | 45            | 25.4           |
| Other  | 3             | 1.7            |
| Total  | 177***        | 100            |
| Have you personally been involved in any safety risks    |               |                |
| Yes  | 51            | 42.9           |
| No   | 68            | 57.1           |
| Total  | 119*          | 100            |

<sup>\*=</sup> Missing data \*\*\*Multiple Choice Response

Ensuring employees' safety at work partly requires training them on safety practices and from the results, majority (87.5%) of the respondents revealed that they have been trained on safety practices at the housekeeping department. However, 12.5% of the respondents from some of the 2-star and 1-star hotels stressed that they were not given any form of training on safety practices. Findings are coherent with the study of Lind, Nenonen & Rahnasto (2008), which alluded to the lack of training as the major cause of health and safety hazards in the hotel sector especially in the lower-ranked hotels. Walters (1998), argued that the lack of training in the lower-ranked hotels can be attributed to the lack of resources and sheer negligence. Additionally, out of those who received training on safety practices, 32.2% disclosed that they have received training in the area of health and safety, 25.4% received training on emergency/safety procedures, the same percentage – 25.4% of respondents also acquired training on first aid. Furthermore, 8.5% received training in stress management, 6.8% also obtained training on machinery/equipment preventive maintenance and 1.7% received training in other areas like learning to use certain equipment and general safety precautions.

From the results, it is evident that most of the training on safety practices borders on health, emergency/safety procedures, and on first aid equipment. Based on that, 82.5% alluded to the fact that they know exactly who to do in case a co-worker suffers and injury. Amidst the training, 17.5% on the other frankly revealed that they do not have much knowledge on safety, health, and emergency procedures hence they will be unable to help to apply and emergency procedure in case of any misfortune. Nevertheless, 42.9% of the respondents who said they have personally encountered some form of safety hazards in their line of duty at the housekeeping department. Some of these safety risks are burns, muscular strains, bruises, sexual harassment, etc.

## Safety Practices of managers in the housekeeping department of the selected Hotels

This sub-section presents findings and discussion on Safety practice protocols in hotels implemented and spearheaded by management. To this end, information was solicited from management in order to verify the various safety practices implemented. Table 2 below presents results on safety practices that are put in place by management.

According to 77.2%t of the respondents – management, their respective hotels do have written policy statement reflecting their commitment to safety and health concerns of employees, and 52.6% revealed that these policy documents are readily available to all employees. On the contrary, 47.4% said the policy is not available to employees. Having a written policy statement is a first step to exuding commitment and readiness to addressing safety issues of employees but the real responsibility is centred on assigning safety officers to oversee the issue of safety of employees and simultaneously providing the requisite tools need to ensuring safety at the workplace. From Table 2, 48.2% of the respondents said they have safety and health officers at the hotel who ensures the health and safety of employees at the hotel. However, 51.8% of the respondents which constitutes the majority on the other hand said they do not have safety and health officers at their hotels. This set of respondents disclosed that most of the safety and health concerns of employees are addressed by their supervisors. Moreover, 78.9% of the respondents also said, their hotels oftentimes do carry risk and safety assessment of the hotel to ensure that the work environment is safe for all workers, but 21.1% of the respondents revealed otherwise.

Additionally, in the presence of written policy on safety and health, safety officers, and the conduction of periodic risk assessment at the hotels, they still do record high incidences of work-related accidents. Using 2019 as a preamble, 89.5% of the respondents admitted the occurrence of work-related accidents in the form of falls, slips, burns, bruises,

electrical shocks, sexual harassment, back injury, etc. About, 78.9% of the respondent reported more than 15 safety incidences occurring in 2019 alone at the housekeeping department, and this cause for worry, as these incidences tend to affect employees' performance.

Table 2 Safety Practices in a Hotel

| Variables   | Frequency (N) | Percentage (%) |
|---|---------------|----------------|
| Does your hotel have written policy statement reflecting its commitment |               |                |
| to safety and health?   |               |                |
| Yes   | 44            | 77.2           |
| No  | 13            | 22.8           |
| Total   | 57            | 100            |
| Is the said policy readily available to employees?                      |               |                |
| Yes   | 30            | 52.6           |
| No  | 27            | 47.4           |
| Total   | 57            | 100            |
| Do you have a safety and health officer at the hotel?                   |               |                |
| Yes   | 27            | 48.2           |
| No  | 29            | 51.8           |
| Total   | 56*           | 100            |
| Does the hotel carry risk and safety assessment?                        |               |                |
| Yes   | 45            | 78.9           |
| No  | 12            | 21.1           |
| Total   | 57            | 100            |
| Did you record any work-related accident in 2019                        |               |                |
| Yes   | 51            | 89.5           |
| No  | 6             | 10.5           |
| Total   | 57            | 100            |
| How many work-related accidents have you recorded in the housekeeping   | g             |                |
| department in 2019  |               |                |
| Less than 15 cases  | 12            | 21.1           |
| 15 – 30 cases   | 21            | 36.8           |
| 30 – 50 cases   | 20            | 35.1           |
| Above 50 cases  | 4             | 7.0            |
| Total   | 57            | 100            |

<sup>\*=</sup> Missing Data

#### **CONCLUSION**

The study concluded that employees at the housekeeping department are trained on safety practices, specifically in the sphere of health and safety trainings, stress management training, emergency procedures, and first aid equipment usage. The study also indicated that various forms of safety hazards/risks such as burns, muscular strains, bruises, sexual harassment, etc. have 'mild' impact' on the overall performance of the hotel. Indeed, activities in the housekeeping department is physically demanding and it is plunged with repetitive motion injuries, it is recommended that more male are employed in this department or more technological devices should be used in the housekeeping department in order to reduce the risk of suffering from back injuries and bodily posture-related ailments. It was evident that a substantial amount of injuries occurred at the housekeeping over the past year. This is to stress the fact that injuries do not only occur in the kitchen department as perceived by numerous people. It is also recommended that safety issues in other departments are taking into consideration when tackling the issue of safety in the hotel space.

It is once again recommended that, Management of lower-rated hotels should endeavour to put safety protocols in place to avert any form of safety risks/hazards. To the Ghana Tourism Authority, it is very paramount that they conduct frequent surprise supervision of hotels and sanction those that fail to ensure safety at their facilities.

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