



International
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Sustainability Guidelines for
Model Enterprise Clinics
At RMG Industries In Bangladesh



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Sustainability Guidelines for Model Enterprise Clinic at RMG Industries in Bangladesh

Implementing partners



Knowledge partner



Connecting People, Saving Lives

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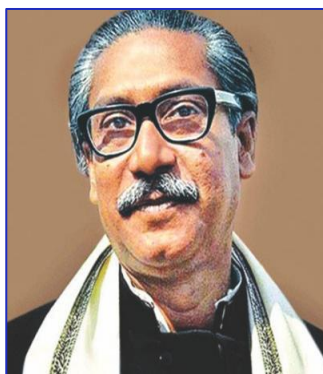
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“No nation can achieve sustainable development without the active participation and contribution of its labor force. Let us recognize and appreciate the invaluable role of workers in nation-building”

**Father of the Nation
Bangabandhu Sheikh Mujibur Rahman**



“Health is wealth, which can be attained only through the collective actions of government, health professionals, scientific community, the private sector and the international community Let us renew our commitment to “Health fo All” as an essential precondition to transforming people as human assets. Only then will we be able to promote human dignity and enhance their quality of life. This is surely what we owe to our peoples”

**Honorable Prime Minister
H.E. Sheikh Hasina**

Preface

The International Labour Organization (ILO), in collaboration with the Ministry of Labour & Employment and employers' associations in Bangladesh, including BGMEA, BKMEA, and BEF, and workers organizations including NCCWE and IBC, is working to establish effective Enterprise Clinics within factories. CMED Health Limited as knowledge partner has developed a sustainability guideline to guide employers in creating and maintaining model enterprise clinics. Sustainability for employers emphasizes less amount of initial investment, affordability, and no extra cost to maintain the Model Enterprise Clinic. Sustainability Guide is an effort to propose measures for economizing such cost-intensive elements for making it affordable for Employers to establish good quality Enterprise Clinics. The sustainability guidance offers stakeholders' suggestions for healthcare facilities within factories, emphasizing the importance of aligning with government strategies and considering the unique requirements of different financial processes related to clinic operations. The ready-made garment sector in Bangladesh is the primary focus of this initiative due to its significant contribution to the country's exports and being exemplary for other 41 sectors.


To ensure the well-being and safety of workers in Bangladesh, the implementation of the Employment Injury Scheme and the enhancement of Enterprise Clinics in RMG factories are essential. A collective approach based on industrial solidarity can help reduce costs. Gaps between large and small factories in terms of healthcare facilities, availability of doctors, and knowledge regarding workplace diseases and injuries can be minimized through innovative solutions, collaborations, and capacity building for healthcare staff are necessary for the success of Enterprise Clinics and the overall improvement of workers' health conditions in the ready-made garment sector.

The active participation and contribution of implementing partners Bangladesh Garment Manufacturers and Exporters Association (BGMEA), the Bangladesh Knitwear Manufacturers and Exporters Association (BKMEA), and the Department of Inspection for Factories and Establishments (DIFE) under the Ministry of Labour & Employment (MoLE), workers organizations including NCCWE and IBC, several RMG owners and owners representatives managing operations and finances, doctors working at different RMG industries in the development and review of the guidelines have been useful. The incorporation of their insights, industry knowledge, and expertise has greatly enhanced the sustainability guidelines practicality and relevance. Their suggestions on major cost intensive elements of Enterprise Clinics as well as other perspectives are included in the relevant part in the guidelines section.



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Abbreviation

AI	Artificial Intelligence
BGMEA	Bangladesh Garments Manufacturers and Exporters Associations
BKMEA	Bangladesh Knit Manufacturers and Exporters Associations
BLR	Bangladesh Labour Rule
BMDC	Bangladesh Medical and Dental Council
CSR	Corporate Social Responsibility
DGHS	Directorate General of Health Services
DGME	Directorate General of Medical Education
DGNM	Directorate General of Nursing & Midwifery
DoL	Department of Labour
EC	Enterprise Clinic
EIS	Employment Injury Scheme
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
IDHP	Integrated digital health care platform
IT	Information Technology
KPI	Key Performance Indicator
LEED	Leadership in Energy and Environmental Design
MoLE	Ministry of Labour and Employment
NBR	National Board of Revenue
OHS	Occupational Health and Safety
P2P	Purchase to pay
PPE	Personal Protective equipment
RMG	Ready Made Garments
SOP	Standard operating procedure
UHC	Upazilla Health Complex
WHO	World Health organization

Sustainability Guidelines for Model Enterprise Clinic at RMG Industries in Bangladesh

Introduction

The 'Model Enterprise Clinics' are those factory-based health clinics which fully comply with all regulatory requirements enshrined in the Bangladesh Labour Rules. Model Enterprise Clinics are considered one of the important elements of a factory as they provide preventive healthcare for workers, and they are first responders in case of any workplace accident or occupational diseases. Presence of an active Enterprise Clinic can reduce the occurrence of workplace accidents and diseases and help in reducing risk of disability or death of workers in case of workplace accident or disease – thus reducing cost of compensation and liabilities as well as reputational risk for the employers.

Based on relevant provisions in Bangladesh Labour Law 2006 and Bangladesh Labour Rules 2015 Enterprise Clinics at factories are divided into seven groups depending on size of workers. Different nomenclatures have been used in government documents at different sections to mention about healthcare facilities within factories like sick room, treatment room, treatment unit, medical room, treatment room/ treatment unit/ medical room with dispensary, permanent medical Center, which are synonymous to Enterprise Clinics used within this sustainability guidelines. As part of the EIS-Pilot Project, ILO is undertaking an initiative to develop sustainability guidelines for employers to establish model enterprise clinics and to identify ways for economizing costs of the Enterprise Clinics – making it affordable for Employers to run efficient Clinics in their workplaces.

Objectives

Major objectives of Sustainability Guidelines:

1. To propose various measures for economizing cost-intensive elements of Enterprise Clinics;
2. To establish good quality Enterprise Clinics and to make it affordable for Employers
3. To suggest measures for solidarity financing to reduce overall health related-costs from employers
4. To contribute towards quality of healthcare services through collaborative efforts between factory owners, industrial associations, and relevant Government and private institutions

Methodology

This Sustainability Guide is developed through a participatory approach after receiving feedback from all relevant stakeholders in a tripartite Consultative Meeting held on 23rd November 2022 and subsequent bilateral interviews with 18 key stakeholders. Subsequently, a detailed session with 14 RMG Employers was organized on 4th April 2023 from across the board including garment and knitwear industries.

The Sustainability Guidelines have been compiled mainly into two groups, first Guidelines for factory level actions and second Guidelines for Association level actions. Factory-level actions are for individual factory-owners/managers while Association level actions are for collective action by relevant associations.

Key Challenges

The financial viability of model enterprise clinics or health services in factories face several challenges due to different cost intensive elements. Following are some of the principal challenges:

- ▶ Establishment & Infrastructure of Enterprise Clinic
- ▶ High Operational Cost
- ▶ Costs related to recruitment of competent and trained staff
- ▶ Lack of data and evidence to take data-driven decisions
- ▶ Lack of solidarity funding mechanism
- ▶ Limited awareness and use



Guidelines for Factory Level Work

Guideline-1: Improve management system of Enterprise Clinic to get optimum performance and value for money

Generally, factory management is busy with several issues which attract their immediate attention – which includes production, financing, labour issues, and supply chain management leaving less priority to focus on management of Enterprise Clinics. It is important that factory management should establish seamless system to effectively manage Enterprise Clinics – to ensure value for money and cost effectiveness.

What needs to be done?

- Setting clear objectives – with indication of a clear menu of services offered in the Enterprise Clinics
- Effective performance management of Enterprise Clinic
- Periodic review of Enterprise Clinic to check value for money for the Clinic

How to do it?

- Establish a Healthcare Committee (2 members from existing safety committee, 1 welfare officer and 1 doctor from enterprise clinic) and agree on a menu of services to be offered in Enterprise Clinic
- Develop key performance indicators (KPIs) for Enterprise Clinic and inform staff of enterprise clinic about KPIs
- Assign specific responsibilities to Enterprise Clinic staff and ensure individual accountability mechanism to ensure transparency in management
- Develop a digital monitoring mechanism to review performance of Enterprise Clinics in line with agreed KPIs
- Take timely decisions and merit-based appraisal to encourage good performance of healthcare staff
- Incentivise good performance in monetary as well as non-monetary terms
- Create a positive work environment for healthcare staff to perform their duties in a better way

Guideline-2: Develop a business model for Enterprise Clinic to reduce costs and improve services

A business model is a 'a plan for the successful operation of a business or smaller unit in business, identifying sources of revenue, the intended customer base, products, and details of financing'. Business models determine an organization or unit's capabilities (what it can and can't do) and its priorities (what it must accomplish). This, in turn, defines which innovations it can and will pursue.

What needs to be done?

- A clear business model showing service delivery and income recovery (both in monetary terms as well as in terms of productivity of workers)
- Shared understanding between management, healthcare staff, and workers, on business model for Enterprise Clinics
- Regular review and adjustment to ensure cost efficiency

How to do it?

- A good business model needs to balance following four elements in an effective manner: Value proposition, Resources, Processes, and Profit formula.
- In case of Enterprise Clinics, the profit formula will not necessarily be in pure monetary terms – but it can also be in terms of increased productivity of workers, reducing absenteeism due to sickness or diseases, and reduced turnover of workers.
- The Business model will include an analysis of what services are required by 'Law' and which services are requested by 'Workers'. Factory owner can make a cost assessment if they can meet both legal and demand-based services through their existing financial model.
- A copay method could be adopted for those services which are not required by law – however, this method would be discussed among Employer and Workers before its implementation.
- The factory management need to develop a reasonable business model which helps them strike a balance between the four elements thus ensuring value for money from the Enterprise Clinic.

Guideline-3: Collaborate with other factories in the nearby areas for combining resources

Collaboration amongst factory owners (in same vicinity) to improve healthcare is an important strategy for sustainable benefits. It is about moving from a traditional solitary, intra-organization focus to one that crosses those well-formed boundaries, creating a relationship of solidarity in order to better serve health needs of workers. Collaboration works because it takes the best practices of each business, refines them and puts them into practical use for the benefit of the whole system.

The Bangladesh Labor Rules, 2015, or BLR 78, set forth standards for such collaboration, to establish collective enterprise clinic by various factory owners in the same location. This will have ready impact on costs and will take away the responsibility for management of facility from every single employer – to a collective platform.

What needs to be done?

- Establishing joint Enterprise Clinics as 'common service centres' instead of individual facilities;
- Establishing a effective and accountable management system for common Enterprise Clinic;
- Ensure good service delivery by common enterprise clinic for workers of each factory
- Develop a joint funding mechanism for common enterprise clinic – based on equity

How to do it?

- Invite all neighbouring factory owners for a discussion on establishing common Enterprise Clinics.
- Understand needs of each factory owner in terms of their number of workers, type of work, nature of medical requirements, frequency of injuries, and types of service requirements
- Propose a mechanism for common enterprise clinic in a mutually accessible location where all factory workers can easily access and get services
- Develop a cost estimate for a common enterprise clinic and a formula for cost contributions by various partnering factories (based on number of workers, frequency of injuries, etc)
- Develop a management system to ensure quality service delivery within given resources
- Develop a joint oversight and governance mechanism where all contributing factories regularly review performance of common Enterprise Clinic
- Undertake annual performance review to assess value for money for common enterprise clinic

Guideline-4: Reducing overheads by recruiting competent and dedicated healthcare workers and providing good working conditions

Incompetence has a cost and recruitment of incompetent staff in Enterprise Clinic eventually increases the overhead costs and reduces efficiency. It also affects workers confidence on Enterprise Clinic, and they try to avoid visiting the Clinic even in case of serious cases. Incompetence of healthcare staff increase the operational costs, wastage of resources, reduced service delivery, reduce staff satisfaction, and ultimately reduce utilization of healthcare service.

Therefore, recruitment of competent staff in Enterprise Clinic is an important strategy to ensure sustainability of the Enterprise Clinic – which ultimately helps in reducing operational costs and improves service delivery.

Improved working conditions also help in retaining good quality and competent staff in Enterprise Clinics. Improved wages, adequate measures for safety and health, job security, reasonable working hours, non-discrimination, and prevention against harassment and abuse at workplace are some of the important elements of improved working conditions.

What needs to be done?

- Ensure availability of competent and dedicated staff in Enterprise Clinics
- Ensure better working conditions to enterprise clinic staff

How this should be done?

- Give a proper attention to recruit good quality and competent staff for Enterprise Clinic in the same way as done for production and other departments
- Collaborate with Industrial Association and relevant Government institutions for provision of competent healthcare staff
- Collaborate with other factory owners to recruit good quality and competent Doctors on cost-sharing basis – for providing services in more than one factories on part-time bases
- Keep provision of post graduate training for doctors will allow to recruit competent human resources
- Refresher training on OHS for all level clinical staffs will ensure retention of staffs and improve quality of services

Guideline-5: Adopt improved procurement system to reduce cost of medical supplies

Improved procurement system for medical supplies can help in cost savings made during a purchasing process. It includes savings made through re-negotiation of contract terms and conditions, administrative and operational process improvements, and the intelligent use of data and technology. These actions require thought, planning, and possible investment in resources. However, they have the potential to pay off much more in the long term.

What needs to be done?

- Adopt improved procurement system for cost saving on medical supplies without compromising quality and quantity
- Adopt formal relationship with suppliers to ensure clear responsibilities and expectations
- Maintain good relations with suppliers to ensure continued supplies in the long term

How to do it?

- **Review entire procurement system:** Such review for medical supplies and make necessary reforms to ensure getting good value for money and it can result in cost saving.
- **Revisit current contract terms:** It is an acceptable practice to challenge the terms of an existing contract. Any contract not reviewed for more than three years should offer some savings opportunities. It is likely that some pricing has become uncompetitive and that there is scope for revisiting payment terms. Opening discussions with your suppliers about potential changes to purchasing frequency can lead to volume discounts.
- **Challenge specifications:** Product specifications and packaging are often based on supplier proposals or set with one particular supplier or brand in mind. Requirements should be based on expected performance or outcome which allows for increased competition by a broader range of suppliers. Eg. Use of generic names for medicine instead of trade names.
- **Challenge operational costs:** Proper procurement planning helps reduce costs by ensuring the best use of administrative resources. Poor planning leads to expensive emergency procurement actions and high transport costs. By streamlining internal purchase-to-pay (P2P) processes, whether automated or not, you can reduce transactional costs and additional documentation.
- **Review uncompetitive suppliers:** The benchmarking process done when reviewing contracts can highlight other similar suppliers in your database that are not competitive. These suppliers can be approached to reduce their costs in line with the market or failing that, can be removed by moving that spend to more competitive suppliers.
- **Use the data you have:** Clean, complete, and timely data is critical for embarking on any savings initiative. Reliable information on past purchases and supplier performance can highlight opportunities and drive re-negotiation efforts.
- **Using technology:** There are many software solutions that address all or part of the procurement process with the aim of generating savings. There are opportunities for cost reduction in implementing P2P, spend analysis, and AI in procurement.
- **Reduce procurement risk:** The role of risk management within procurement means ensuring that the correct management controls are in place, especially for ad-hoc and emergency purchases. Part of risk management also means focusing on cost avoidance - which is a type of savings. This can be achieved, for example, by limiting the rate of price increases or obtaining more value from existing contracts.

Guideline-6: Collaborate with Government to use Union Health Centers/ Upazila Health Complexes/ Shromo Kallyan Kendro by DoL as Enterprise Clinics

Bangladesh has established more than 4000 Union Health Complexes to provide primary healthcare with a plan of each covering a population of around 25000. The provision of healthcare through UHCs is truly participatory since the community people donate land for building infrastructure and also involve in management process.

Using the existing Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro as Enterprise Clinics can be a cost-effective and sustainable option.

What needs to be done?

- Collaborate with Government to use Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro as Enterprise Clinic
- Develop a mechanism to pay for services of Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro

How to do it?

- Factory owners can collaborate with local authorities, including the Ministry of Health and Family Welfare, MoLE and local government bodies, to identify Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro in the vicinity of their factories. This can help ensure that workers have access to healthcare services at a low cost.
- A public-private partnership model can be adopted, where owners of RMG industries collaborate with the government to establish and run Enterprise Clinics at Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro. This can help ensure that the clinics are sustainable in the long term and provide high-quality healthcare services to workers.
- Customizing Services: Union Health Complexes, 32 existing shromo kallyan Kendro can be customized to meet the specific healthcare needs of RMG workers. For example, services such as immunization, family planning, and maternity care can be prioritized.
- Upgrading Infrastructure and Equipment: Upgrading the infrastructure and equipment at Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro can help ensure that they meet the healthcare needs of RMG workers. This can include providing essential equipment such as diagnostic machines, drugs, and vaccines.
- Training Healthcare Providers: Healthcare providers at Union Health Complexes, Upazila Health Complexes where relevant or 32 existing shromo kallyan Kendro can be trained to provide specialized services to RMG workers. For example, training can be provided on occupational health and safety, and on how to identify and manage work-related health issues.

Guideline-7: Adopt digital health for 24/7 coverage and low cost medical consultation

The broad scope of digital health includes categories such as integrated digital health care platform (IDHP) health information technology (IT), wearable devices, telehealth and telemedicine, and personalized medicine. The benefits of digital health technology are enormous. It is convenient, and can be used anytime, anywhere. Virtual care can reach more people than face-to-face, and is often cheaper. It can empower people to manage their own conditions, and even has environmental benefits in terms of reduced travelling and emissions.

The adoption of digital health service can be highly beneficial in helping owners run their enterprise clinics in a sustainable manner.

What needs to be done?

- Offer an appropriate model of digital health or telemedicine service in Enterprise Clinic
- Develop a data repository from digital health service – to be used for future decision making

How to do it?

- Identify affordable options to offer digital health services in Enterprise Clinics to make it more affordable and efficient
- Engage a most appropriate Digital Health partner organization to offer adequate services in Enterprise Clinics
- The involvement of digital health service providers can help owners run their enterprise clinics in a sustainable manner by enabling efficient healthcare delivery, improving worker engagement, and optimizing healthcare planning and decision-making.
- Digital health service providers can help owners implement Integrated Digital Healthcare Platform. IDHPs allow for the efficient storage and retrieval of patient records, reducing the burden on manual record-keeping and enabling better management of patient care.
- Digital health service providers can enable owners to offer telemedicine services to their workers. This can help improve access to healthcare services, especially for workers doing night shifts and after working hours, while reducing costs associated with in-person visits.
- Digital health service providers can offer data analytics services to owners, enabling them to analyse patient data and identify trends that can inform healthcare planning and decision-making. This can help owners optimize their healthcare delivery and improve the quality of care provided to their workers.
- Digital health service providers can help owners set up remote monitoring systems that enable healthcare professionals to monitor workers' health remotely. This can help identify health issues early and enable prompt intervention, improving health outcomes and reducing the burden on the clinic.
- Digital health Care Service providers can arrange doctors, nurses, technologists, paramedics to industries according to their needs which fulfilling regulatory requirements also.

Guideline-8: Collaborate with District Hospital, Public Medical College Hospital, Upazilla Health Complexes for periodic visits of Government Specialist Doctors to factories for provision of specialist services in Enterprise Clinics

Workers in RMG factories are commonly suffering from musculoskeletal pain, hypertension, respiratory disease, depression, digestive disorder, dysuria (pain or difficulty in urinating), backpain, and skin diseases. Women are also anaemic due to lack of nutritious food and suffer from neurological problems. In addition, injuries in hands, hips, and legs, are common among women and men workers.

Some of these health problems require consultation and advice from Specialist Doctors – however, the Enterprise Clinics do not provide such services as they are not required as per law.

This challenge can be addressed by individual industry management approaching the nearby district hospital, Public Medical College Hospital, Upazilla Health Complexes to coordinate and make an arrangement whereby Government Specialist Doctors could be assigned to visit Enterprise Clinics on fixed periods and provide consultation and medical advice free of cost. This will not only resolve a major problem of RMG workers but will also enhance effectiveness of Enterprise Clinics to address chronic issues of workers.

What needs to be done?

- A system for Government Specialist Doctors (including lady doctors) periodic visits to Enterprise Clinics and providing consultation and advice on most common health problems

How to do it?

- Individual Industry Management can establish a coordination mechanism with nearby district hospital, Public Medical College Hospital, Upazilla Health Complexes and share a list of most common health problems to the Government.
- Individual Industry Management can request nearby district hospital, Public Medical College Hospital, Upazilla Health Complexes to send relevant Specialist Doctors to factories on fixed periods. Individual Industry Management can pick up cost for transportation and food for visiting Doctors.
- Authority of nearby district hospital, Public Medical College Hospital, Upazilla Health Complexes can identify a list of Doctors with relevant specialisation and who are willing to spend a few days in a month visiting Factory Enterprise Clinics.
- Enterprise Clinics will make all necessary preparations to prepare list of important patients among workers for consultation and assist Specialists to undertake necessary diagnosis and provide medical advice.



Guidelines for Association Level Work

Guideline-9: Establish Health Committees at Association level to support member factories on reducing overheads of Enterprise Clinics

This proposal aims to maintain a Health Committee within the major industrial associations of RMG sector, i.e., Bangladesh Garment Manufacturers and Exporters Association (BGMEA) and the Bangladesh Knitwear Manufacturers and Exporters Association (BKMEA), to implement collective measures for cost reduction at enterprise clinics in different factories.

What needs to be done?

- Establish Health Committees at Association level to support member factories in reducing cost overheads on healthcare services
- The committee will serve as a platform for collaboration, knowledge sharing, and decision-making on health-related issues in the RMG industry.
- By leveraging the collective resources and expertise of member factories, the committee will work towards improving healthcare services while minimizing costs.

How to do it?

- The Health Committee will be formed under the auspices of associations, they will keep representatives from member factories, healthcare professionals, and relevant stakeholders (eg. DGHS, WHO, GIZ, Gonoshyastho kendro, etc.) as advisor.
- The committee will appoint a chairperson (one Vice president/ Director of associations) and establish sub-committees to focus on specific areas such as healthcare infrastructure, cost optimization, common procurement of medical supplies, employee wellness programs, and training.
- The committee will facilitate regular meetings, workshops, and conferences where member factories can share best practices, success stories, and challenges faced in managing enterprise clinics.
- The committee will leverage the collective purchasing power of member factories to negotiate better deals with medical suppliers, pharmaceutical companies, and equipment providers.
- The committee will organize training programs and workshops to enhance the skills and knowledge of clinic staff, focusing on areas such as first aid, occupational health, and preventive care.
- The Health Committee will provide advisory service to member factories for improving their Enterprise Clinics
- The Health Committee will coordinate with Government, Workers, Medical Colleges, Nursing Institutes, and Insurance organizations, for different interventions to improve health services for RMG workers
- The Health Committee will undertake any other activity necessary to improve healthcare services for RMG workers

Guideline-10: Undertake mapping and geographic location of member factories and advise establishment of ‘combined Clinics’ in concentration areas

In Bangladesh Labour Regulations, there is a provision for establishing one combined healthcare facility by more than one factory in the same geographic location. This can help in reducing cost of establishing Enterprise Clinics to a greater extent.

What needs to be done?

- Mapping and geolocation of member factories
- Establish combined Enterprise Clinics in concentration areas for factories
- Already BGMEA has 12 clinics and 2 hospitals, BKMEA has 1 clinic in different places of Dhaka, Narayanganj, Gazipur and Chottogram. There are 32 shromo kallyan kendro of DoL with provision of treatment facilities also exist.

How to do it?

- The Associations should undertake overall mapping and geolocation of their member factories
- Identify areas of concentration for more than one factories in very close proximity to each other
- Undertake assessment for possibility of establishing a combined Enterprise Clinic instead of establishing and operating individual Clinics
- Advise and facilitate dialogue between member factories to establish combined Enterprise Clinics in as many locations as possible.
- Develop standard operating procedures (SOPs) for establishing combined health facilities – with clarity on roles and responsibilities of member factories, menu of service delivery, management structure of combined facility, governance mechanism, performance appraisal system – primarily, with a focus on economizing costs

Guideline-11: Coordinate with Medical Colleges and Nursing Institutes for provision of required number of Doctors and Nurses to work in factories to overcome shortage of human resources

Every workplace with more than 300 employees is required by law to have a fulltime doctor. Due to acute shortage of doctors in the country, this standard is difficult to meet, and therefore most of the factories simply have a nurse, a clinic area, and some basic medications. There is a part-time visiting doctor on occasion.

To overcome the shortage of qualified and dedicated human resources for Enterprise Clinics, the Health Committees in associations can coordinate with public and private sector medical colleges, nursing institutes, and other similar institutions to share their demand and get required number of well qualified and dedicated human resources – including Doctors, Nurses, and Paramedics.

In addition, the Health Committees can also work with Directorate General of Medical Education (DGME) and Directorate General of Nursing & Midwifery (DGNM) to develop curriculum on 'Occupational Health and Safety' covering the areas of industrial injuries, occupational diseases, and specialized services in factories – which are different from conventional hospital-based services.

What needs to be done?

- Encourage medical colleges and nursing institutes to produce required number of doctors, nurses, and paramedics to fulfil requirements of Enterprise Clinics
- Help DGME and DGNM to develop curriculum on 'Occupational Health and Safety' to prepare future doctors and nurses with specialized requirements of industries
- Help medical colleges and nursing institutes to develop training courses on 'Occupational Health and Safety' to prepare future doctors and nurses with specialized requirements of industries
- Medical Colleges and Nursing Institutes can also recognize working in Enterprise Clinics as a house-job which is pre-requisite to get a medical degree for students. This way, a large number of young Doctors, completing their medical studies, can be available to work in Enterprise Clinics – under the supervision of their senior Doctors in hospitals.

How to do it?

- Collect data of all member factories with number of vacant positions for Doctors, nurses, and paramedics and identify key challenges faced by factory owners in recruiting good quality human resources
- Establish a permanent coordination forum with DGHS, DGME and DGNM principles of medical colleges, and nursing institutes.
- Develop an action plan to cover the gap in demand and supply of qualified human resources
- Regularly review action plan to see progress and ensure accountability
- Work with DGME and DGNM to develop curriculum on 'Industrial / Occupational Medicine' and include it in regular courses of Medical Colleges and Nursing Institutes.
- After first batch of graduates pass out of institutes, make it a mandatory requirement for recruiting Doctors and nurses with specialization in 'Industrial / Occupational Medicine'

Guideline-12: Collaborate with DoL to provide full time Doctors, Nurses and Paramedics to Enterprise Clinics on reduced costs

The existing healthcare systems cannot provide full protection to RMG workers because there is a large-scale shortage of qualified healthcare providers in Bangladesh. For instance, the nurse to population ratio is 1:7788 and the doctor to population ratio is 1:46457 in the country. Also, the doctors and nurses do not consider Enterprise Clinics as an attractive place of work – as they are neither trained to work in a factory environment nor they see any career growth in a factory.

To address the shortage of doctors and nurses for Enterprise Clinics and to provide a career path for doctors, the Association Health Committee can collaborate with DoL to make an arrangement whereby a pool of doctors, nurses, and paramedics will be recruited by DoL. These Non-cadre doctors, nurses and paramedics will perform their service in Enterprise Clinics. They will have same career growth opportunities as are there for doctors in Government hospitals.

What needs to be done?

- Initiative by DoL to recruit additional doctors, nurses, and paramedics, and provide their services to the Enterprise Clinics.

How to do it?

- Association Health Committee to prepare a complete proposal for DoL to ensure deputation Non-Cadre Doctors, nurses, and paramedics for Enterprise Clinics on cost-sharing basis.
- These doctors, nurses, and paramedics will be employees of DoL and will have all privileges and growth opportunities as their compatriots in hospital has.
- RMG Industry pay a certain fee to the DoL and in lieu of that fee, DoL will assign Non-Cadre doctors, nurses, and paramedics, to Enterprise Clinics either on part-time or full-time basis (as per requirements in factory).
- It will be a win-win situation for all. Factory will have access to good quality doctors, nurses, and paramedics. Government will create additional job opportunities with financial contribution of RMG Industries. Doctors will get additional job options without compromising their career growth in Government.

Guideline-13: Collaborate with DGHS to offer free training courses to existing Healthcare Officials in industrial / occupational medicine

Supply-and-demand factors usually influence management's decision to recruit inadequately trained healthcare staff in factories. On the supply side, there is a general shortage of healthcare workers in Bangladesh. Doctors and Nurses usually earn less in factories than their counterparts in the public or private hospitals and, therefore, factories have limited candidates to choose from. On the demand side, many factories recruit healthcare staff to meet the compliance requirement, but they are not legally incentivized to hire fully trained staff or to invest in their professional development once hired. There is no specific requirement in the Government regulation regarding the qualifications level of healthcare staff and this issue is not currently assessed in national or international compliance assessments.

On the other hand, occupational medicine (previously called industrial medicine) is getting more and more specialized in its nature and application. Occupational medicine is the branch of medicine which is concerned with the maintenance of health in the workplace, including prevention and treatment of diseases and injuries, with secondary objectives of maintaining and increasing productivity and social adjustment in the workplace.

Therefore, it is very important that all staff in Enterprise Clinics are regularly trained on Occupational Medicine and provide adequate hands-on experience under supervision of senior Doctors in this field.

What needs to be done?

- Regular training of existing healthcare staff in Enterprise Clinics on occupational medicine by DGHS
- Inclusion of occupational medicine in curriculum for Doctors and Nurses in their regular courses

How to do it?

- The Association Health Committee establish coordination with DGHS and share number of healthcare staff working in Enterprise Clinics in different factories
- DGHS and Health Committee jointly develop modular training programmes for Doctors and Nurses on occupational medicine
- DGHS and Health Committee develop a joint workplan for organizing modular training programmes (daylong sessions) – with cost-sharing basis
 - ▶ DGHS to provide technical expertise in developing course material and facilitators for training – free of cost
 - ▶ Health Committee to provide training venue in Association Committee rooms and provide refreshments for participants
- Plan should cover all healthcare staff in all Enterprise Clinics
- DGHS should also contact BMDC for inclusion of 'Occupational Medicine' in regular courses of medical and nursing colleges

Guideline-14: Collaborate with Ministry of Labour & Employment (MoLE) to develop a 'Social Security Scheme for Health' with solidarity funding of Government, Employers, Workers and other stakeholders

To promote a culture of social security through solidarity funding of Government, Employers, Workers, and other stakeholders (international Brands, etc), the Association Health Committee can initiate a dialogue with Government of Bangladesh – through Ministry of Labour & Employment (MoLE) to develop a new contributory Social Security Scheme for health coverage. With such scheme in place, the responsibility for establishing 'Enterprise Clinics' will be transferred from Employers to Social Security institution. The Social Security institution will be responsible to provide full health coverage to all workers – through different mechanisms, i.e., establishing health facilities in industrial concentration points, collaborate with existing Government and Private hospitals to cover industrial workers for free treatment, cash reimbursement programme for different diseases, and others.

What needs to be done?

- A contributory social security scheme for provision of healthcare service to workers
- Agreement with Government, Employers, Workers, and other stakeholders (e.g., Brands) to contribute towards social security scheme for healthcare service to workers
- Establish a transparent and effective institutional mechanism and governance system for social security of healthcare services to RMG workers

How to do it?

- The Association Health Committee can initiate a dialogue with ILO and Government of Bangladesh to develop a new contributory social security scheme for health coverage of workers
- Undertake study of the enabling environment to meet the specificities of health coverage
- Cost estimation of extending quality health care for the whole workforce in RMG Sector, with no exceptions
- Define measures to ensure smooth access of all RMG workers to health care throughout the country
- Develop framework for contribution and benefits – along with potential contributors including Government, Employers, Workers, and other stakeholders
- Establish an institutional arrangement for implementation of social security for healthcare of workers
- Establish a tripartite Governance Mechanism to oversee social security scheme for workers
- Regularly evaluate the efficiency of health care provision for RMG workers by social security
- Ensuring the financial sustainability of health coverage
- Developing and disseminating health information campaigns
- Improving individual workers' health by promoting the screening for and prevention of chronic and debilitating conditions



Guidelines for National Stakeholder Level Work

Guideline-15: Advocacy by MoLE to establish a Buyer's fund for welfare of workers through Model Enterprise Clinics

Global buying firms generally follow the relativist philosophy because it provides a cost advantage and allows firms to claim that they are engaging in ethical standards by simply following the host country's wage and working standards (Hoque and Faruq 2009).

Following this approach, global buying firms can apply both defensive and proactive strategies (Nicholls 2002). A defensive strategy maintains the minimum legal requirements and avoids playing a part in any implementation processes in supply firms (Foster and Harney 2005). Proactive strategies involve global buying firms participating in implementation processes in supply firms. Firms using proactive strategies focus on the social and environmental sustainability of the business operations of the supply firm, and do so by considering the impact the firm has on the society in which the firm operates.

In Bangladesh, there are many examples where international Brands and Buyers have actively contributed towards welfare and safety of workers in factories that produce export items. ACCORD, RMG Sustainability Council (RSC), and Employment Injury Scheme Pilot (EIS-Pilot), are some of the major examples.

On these grounds, MoLE and other International Stakeholders can initiate a dialogue with international brands for using their CSR fund to help supplier factories to run their model enterprise clinics in a efficient way to ensure social sustainability.

What needs to be done?

- MoLE and other International Stakeholders can encourage international brands to embrace proactive strategies and effectively utilize their CSR funds to support model enterprise clinics. This will contribute to social sustainability, improve worker welfare, and create a positive impact on the society in which the brands operate.
- Develop supportive policies and regulations that ensure transparency of funds management thus will encourage international brands to allocate CSR funds for model enterprise clinics. Engage other relevant government bodies to highlight the positive impact of such initiatives on workers' welfare and social sustainability.
- Conduct awareness programs targeting global buying firms, emphasizing the importance of social sustainability and the positive impact of model enterprise clinics. Provide information on successful case studies and best practices to demonstrate the benefits of proactive strategies in this regard.

How to do it?

- MoLE and other International stakeholders to facilitate collaboration between international brands, supplier factories, and relevant associations or industry groups. Encourage dialogue and cooperation to collectively address the challenges and opportunities related to social sustainability. Foster partnerships that promote the establishment and effective operation of model enterprise clinics.
- MoLE and other International stakeholders to develop clear guidelines and standards for international brands regarding the utilization of CSR funds for model enterprise clinics. These guidelines should emphasize the need for efficient and effective allocation of funds, ensuring that they directly benefit workers' welfare and contribute to social sustainability. Eg. 1 cent of buyer's CSR fund for each piece of ordered material will given to suppliers factory to maintain their model enterprise clinics as per standard.
- Establish incentives and accountability mechanisms to encourage international brands to allocate a portion of their CSR funds specifically for model enterprise clinics. This can include recognition programs, certifications, or preferential treatment in procurement processes for brands that demonstrate a strong commitment to social sustainability.
- Implement a robust monitoring and evaluation system to track the utilization of CSR funds by international brands for model enterprise clinics. This can involve regular audits, inspections, and reporting mechanisms to ensure transparency and

accountability. MoLE and other International stakeholders can play a crucial role in overseeing these processes.

- Encourage international brands to publicly report their CSR initiatives and the allocation of funds for model enterprise clinics. This promotes transparency and accountability, enabling stakeholders, including workers and consumers, to assess the brand's commitment to social sustainability.

Conclusion

These are various financial sustainability options available to owners of RMG factories to establish and maintain Model Enterprise Clinics in their factories. This can help to ensure the well-being of workers and can also help to prevent legal issues. By being strategic and creative in their approach, owners can ensure that workers receive quality medical care while also managing costs effectively. In the current scenario, Employers may find it difficult to meet all expenses for a Model Enterprise Clinics alone. Therefore, a concerted approach based on industrial solidarity can reduce such costs and some joint arrangements can help in meeting these requirements in a cost-effective manner.

Project Brief

The International Labour Organization (ILO) has developed these Guidelines as part of its project on 'Implementation of a Pilot of Employment Injury Scheme in Bangladesh' funded by the Embassy of Netherlands. The Project works closely with the Ministry of Labour & Employment in Government of Bangladesh as well as with Employers' organizations including Bangladesh Employers Federation (BEF), Bangladesh Garments Manufacturers' and Exporters' Association (BGMEA) and Bangladesh Knitwear Manufacturers' and Exporters' Association (BKMEA), and Workers' organizations notably National Coordination Council for Workers' Education (NCCWE) and IndustriAll Bangladesh Council (IBC). CMED Health Limited is knowledge partner of this Project to develop the Sustainability Guide for Enterprise Clinics in consultation with various stakeholders.

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