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# FACTORS THAT DETERMINE CONSTRUCTION HEALTH AND SAFETY AGENT COLLABORATION ON CONSTRUCTION PROJECTS: A DELPHI STUDY

#### RESEARCH ARTICLE<sup>1</sup>

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#### ABSTRACT

The construction industry (CI) continues to be the cause of injuries and illnesses to many workers worldwide. Collaboration between the construction health and safety agent (CHSA) and other built environment professionals may improve the impact of the CHSA on health and safety (H&S) performance. However, no study has identified the factors that determine CHSA collaboration on construction sites. A three rounds Delphi study was conducted to identify the factors that determine CHSA collaboration. A panel of 14 experts serving the CI were selected from four continents and were asked to identify additional factors and validate the factors identified from literature. Microsoft Excel 2016 was used to analyse the data; group medians were calculated to reach consensus, and open question responses were summarised qualitatively. The experts confirmed the existence of the factors identified in the literature. The factors that determine CHSA collaboration on construction projects include mutuality, trust, enabling environment, personal characteristics, common purpose, institutional

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support, and project context. Drawing from the findings, the study suggests that these seven factors can influence CHSA collaboration. The study is limited to 14 experts and more experts could have provided more information. The factors that determine CHSA collaboration identified in this study may not be exhaustive and another study may provide different factors. Further research could adopt other research methods such as the quantitative method, in order to determine the impact of these factors on CHSA collaboration. Factors that determine CHSA collaboration on construction projects should be identified, implemented, and monitored, in order to increase the influence of CHSA on H&S performance.

#### **ABSTRAK**

Die konstruksiebedryf (KI) is steeds die oorsaak van beserings en siektes vir baie werkers wêreldwyd. Samewerking tussen die konstruksiegesondheids- en veiligheidsagent (KGVA) en ander professionele persone in die bou-omgewing kan die impak van die KGVA op gesondheids- en veiligheidsprestasie (G&V) verbeter. Geen studie het die faktore geïdentifiseer wat KGVA-samewerking op konstruksjeterreine bepaal nie. 'n Delphi-studie van drie rondtes is uitgevoer om die faktore wat KGVA-samewerking bepaal, te identifiseer. 'n Paneel van 14 kundiges uit die KI, is uit vier kontinente gekies. Kenners is versoek om addisionele faktore te identifiseer en die faktore wat uit literatuur geïdentifiseer is, te bekragtig. Microsoft Excel 2016 is gebruik om die data te ontleed en groepmediane is bereken om konsensus te bereik en antwoorde op oop vrae is kwalitatief opgesom. Kenners het die bestaan van die faktore wat in die literatuur geïdentifiseer is, bevestig. Die faktore wat KGVA se samewerking oor bouprojekte bepaal, is onder meer wedersydsheid, vertroue, omgewing, persoonlike eienskappe. gemeenskaplike doel, institusionele ondersteuning en projekkonteks. Uit die bevindinge het die studie voorgestel dat hierdie sewe faktore KGVA-samewerking kan beïnvloed. Die studie is beperk tot 14 kundiges en meer kundiges kon meer inligting verskaf het. Die faktore wat KGVA-samewerking bepaal wat in hierdie studie geïdentifiseer is, is moontlik nie volledig nie en 'n ander studie kan verskillende faktore verskaf. Verdere navorsing kan ander navorsingsmetodes gebruik, soos die kwantitatiewe metode, om die impak van hierdie faktore op KGVA-samewerking te bepaal. Faktore wat KGVAsamewerking op konstruksieprojekte bepaal, moet geïdentifiseer, geïmplementeer en gemonitor word om die invloed van KGVA op G&V-prestasie te verhoog.

Sleutelwoorde: Delphi-studie, gesondheids- en veiligheidsprestasie, konstruksiebedryf, konstruksie gesondheids- en veiligheidsagent, samewerking

#### 1. INTRODUCTION

Several studies have been conducted to improve the poor health and safety (H&S) performance on construction sites (Neale, 2013; Smallwood & Deacon, 2017; Goldswain, 2014). H&S legislations have identified the construction health and safety agent (CHSA) as one of the key stakeholders in achieving zero accident goal on construction sites (Deacon, 2016: 83). In this study, the CHSA is defined as "a competent person who acts as representative for clients who has the capability to design, compile, implement and manage the H&S requirements for construction projects from initiation and briefing to project close-out" (SACPCMP, 2013: 7).

Although South African Construction Regulations 2014 and UK Construction and Design Management Regulations 2015 (Health and

Safety Executive, 2015: 17-18; Deacon, 2016: 83) require all involved on a project to address H&S, there appears to be a lack of collaboration between the CHSA and project managers, designers, quantity surveyors, engineers, and construction managers (Deacon, 2016: 223). This lack of collaboration continues to frustrate construction H&S professionals and academics worldwide (Benjaoran & Bhoka, 2010: 396; Larson & Almen, 2014: 25; Deacon, 2016: 223). Meanwhile, Erickson (2016: 28) suggested that collaboration may improve the impact of CHSA on H&S performance. However, no study has identified the factors that determine CHSA collaboration. As a result, this study seeks to close this gap in literature. The purpose of this study is to identify the factors that determine the CHSA's collaboration on construction projects.

#### LITERATURE REVIEW

# 2.1 Construction industry and construction health and safety agent

Globally, the construction industry (CI) performs poorly in terms of H&S performance (Manu, Emuze, Saurin & Hadikusumo, 2020: 1). It is estimated that at least two construction workers die every week in South Africa (Department of Public Works, 2014: 4). Likewise, according to Samuel (2017: 1), at least 1.5 to 2.5 fatalities occur in South African CI weekly. The increased attention on CHSA has been partly due to the accidents rate and the strong emphasis through H&S legislations (Smallwood & Deacon, 2017). Instead of relying only on project managers, designers, engineers, or construction managers to ensure worker H&S, the involvement of CHSA may add value to project processes and ensure that different project participants address H&S aspects. Meanwhile, the lack of collaboration between CHSAs and other built-environment professionals seems inappropriate, given the importance of H&S management, more specifically, CHSA to construction projects. Due to client, designers and contractors' lack of H&S expertise and experience (Badri, Gbodossou & Nadeau, 2012: 190; Deacon, 2016: 156), CHSAs are usually needed to manage H&S issues (Chunxiang, 2012: 527: Mwanaumo, 2013: 278; Deacon, 2016: 233). In addition, CHSAs are regarded to be among the most important professionals for the management of H&S (Sinelnikov, Inouve & Kerper, 2015: 247; Deacon, 2016: 156; Chunxiang, 2012: 527: Aulin & Caponie, 2010: 93) and also key for the development of H&S culture (Nielsen, 2014: 12; Wu, Lin & Shiau, 2010: 424).

Several studies have been conducted to improve the value or influence of persons managing H&S on H&S performance (Smith & Wadsworth, 2009; Rebbitt, 2012; Cameron, Hare & Duff, 2013; Borys, 2014; Smallwood &

Deacon, 2017; Provan, Dekker & Rae, 2017). These studies agree that the H&S professionals can influence H&S performance, but this influence is dependent on several factors such as personal attributes, trust, body of H&S knowledge, qualification, early involvement, roles, experience, training, line of report, and institutions such as Department of Labour (DoL) and professional bodies.

#### 2.2 Collaboration and its related factors

Everyone generally knows collaboration, but the difficulties arise when they must define it. Some authors use the terms 'common purpose' and 'working together' to define it. Others define collaboration as a relationship between contractor and subcontractor working together to achieve a common goal (Deep, Gajendran & Jefferies, 2019: 4), while others use process to define collaboration such as joint problem-solving (Msomba, Matiko & Mlinga, 2018: 152). A recent study confirmed that there is still no consensus on the definition of collaboration (Rantsatsi, Musonda & Agumba, 2020: 122). This shows that collaboration is broad and that different authors define it differently. In this study, collaboration is defined as a "process in which information, activities, responsibilities and resources are shared to jointly plan, implement, and evaluate a program of activities to achieve a common goal, and a joint generation of value" (Camarinha-Matos, Afsarmanesh, Galeano & Molina, 2009: 47-48).

Collaboration theories provide important insights into the factors that determine collaboration and those that improve performance. The effectiveness of collaboration depends on a myriad of factors. From the point of view of social sciences, Bronstein (2003) identifies four factors that influence interdisciplinary collaboration: professional role, structural characteristics, personal characteristics, and history of collaboration. From the point of view of management, Roberts, Van Wyk and Dhanpat (2016: 5) summarise five factors that determine collaboration: trust, common purpose, mutuality, enabling environment, and personal characteristics. From the perspective of construction management, Deep *et al.* (2019: 10) identify three enablers of collaboration: trust, commitment, and reliability.

Previous studies on collaboration have identified mutuality, trust, enabling environment, personal characteristics, common purpose, institutional support, and project context as the critical factors (Thomson, Perry & Miller, 2007; Amabile, Patterson, Mueller, Wojcik, Kramer, Odomirok & March, 2001; Lu, Zhang & Rowlinson, 2013; Bronstein, 2003; Patel, Pettitt & Wilson, 2012; Torneman, 2015; Roberts *et al.*, 2016).

Mutuality occurs when each party contributes unique resources from which other members can benefit (Thomson *et al.*, 2007: 28; Bronstein, 2003: 299; Roberts *et al.*, 2016: 5). This occurs when one party looks after its

own interests and those of other parties. Indicators of mutuality include equality in decision-making, mutual trust, and respect (Ylitalo, Eerikki & Ziegler, 2004: 549). On construction projects, professionals are expected to rely on each other, hence mutuality becomes important. Mutuality may be an important factor in determining CHSA collaboration on construction projects.

On the other hand, trust refers to the belief and expectations that parties will be honest in agreements and commitments, adhere to their commitments and not exploit other parties (Roberts *et al.*, 2016: 5; Liu, Van Nederveen & Hertogh, 2017: 692; Patel *et al.*, 2012: 14). Khalfan, McDermott and Swan (2007: 385) indicate that trust involves honest communication, reliance and delivery of outcomes, because reliance on one another builds trust. Not only is the level of trust key for decision-making between H&S professionals and line managers, but it is suggested that the level of trust also improves team performance (Rantsatsi *et al.*, 2020: 136). Since construction projects involve diverse professionals, trust becomes a necessity. Therefore, trust may be an important factor in determining CHSA collaboration on construction projects.

Enabling environment includes provision of systems and processes that support the collaboration objectives and the removal of barriers (Roberts *et al.*, 2016: 5; Bronstein, 2003: 304). According to Camarinha-Matos and Afsarmanesh (2008: 313), collaboration requires an enabling environment that can be characterised by clear and open communication (Faris, Gaterell & Hutchinson, 2019: 9), informal and formal communication channels (Mattessich & Monsey, 1992: 16), collective contributions (Camarinha-Matos *et al.*, 2006: 175), and joint decision-making (Ylitalo *et al.*, 2004: 548). An enabling environment may be an important factor in determining CHSA collaboration on construction projects.

Personal characteristics include attitudes, motivations, knowledge, and skills that individual needs in order to collaborate (Amabile *et al.*, 2001; Lu *et al.*, 2013: 31; Roberts *et al.*, 2016: 2; Bronstein, 2003: 304). Membership characteristics include skills, attitudes and opinions of an individual in a collaborative group (Mattessich & Monsey 1992: 22). This includes the motivation and ability to collaborate effectively with others (Amabile *et al.*, 2001: 419). It is widely acknowledged that personal characteristics determine collaboration (Roberts *et al.*, 2016: 2), because individual characteristics can affect the project outcome (Ozturk, 2019: 11). Mattessich and Monsey (1992: 22) revealed that personal characteristics are extremely significant components of successful collaborative endeavours. Personal characteristics may be an important factor in determining CHSA collaboration on construction projects.

Shared purpose refers to shared vision and unique purpose that bring the team together (Roberts *et al.*, 2016: 4; D'Amour, Ferrada-Videla, Rodriquez & Beaulieu, 2005: 119; Faris *et al.*, 2019: 11). Shared purpose promotes collaboration and improves project performance (Pal, Wang & Liang, 2017: 1127). Working collaboratively simply suggests that members pursue a set of common goals (D'Amour *et al.*, 2005: 119). Shared goals can be realised through collaboration. According to Mattessich and Monsey (1992: 32), a shared vision may be developed either when collaboration is in the planning stage or as it begins to function. Having a common purpose is a factor that needs to be in place so that collaboration can happen (Roberts *et al.*, 2016: 4). Common purpose may be an important factor in determining CHSA collaboration on construction projects.

Institutional support refers to the support a project member receives from his/her own institution/organisation such as own company and professional body (Amabile *et al.*, 2001 420: Lu *et al.*, 2013: 31), and even government authorities. From the perspective of education, Amabile *et al.* (2001: 420) highlighted that there is a lack of research on the effect of institutional contexts on collaboration. In their study, Barraket and Loosemore (2018: 396) investigated organisational and institutional factors drive cross-sector collaboration. They found that organisational and institutional factors drive cross-sector collaboration (Barraket & Loosemore, 2018: 406). Institutional support to CHSA is provided through government agencies such as DoL and professional bodies. Institutional support may be an important factor in determining CHSA collaboration on construction projects.

Project context includes project structure and culture. Project structure is important for encouraging interaction and collaboration between individuals (Dietrich, Eskerod, Dalcher & Sandhawalia 2010: 60). However, Akintoye, Mcintosh and Fitzgerald (2000: 166) found that inappropriate organisational structure is one of the barriers for implementing an efficient and successful supply chain collaboration. Dietrich *et al.* (2010: 10) suggested that construction organisations should adopt a flexible organisational structure.

Meanwhile, one of the key factors of collaboration is culture (Hasanzadeha, Hosseinalipourb & Hafezi, 2014; Hughes, 2018; Akintan & Morledge, 2013). Culture can exist at both organisational and project levels. Zheng, Yang and McLean (2013: 765) state that organisational culture shapes how members behave. This is reflected in the organisation's influence on members who are working for it or on the project. Organisationally, culture influences collaboration (Faris *et al.*, 2019: 5). Project structure and culture are necessary to support the collaborative activities expected on the project. Project context may be an important factor in determining CHSA collaboration on construction projects.

#### METHODOLOGY

This study sought to explore, identify, and prioritise factors that determine CHSA collaboration on construction projects. A qualitative research design was used, in which semi-structured questionnaire surveys enabled the researchers to generalise their findings from a group of experts' consensuses (Brady, 2015: 6). The Delphi study method was used, and the survey data were obtained from three rounds. A Delphi study runs a series of rounds to explore divergence and reach consensus among a panel of experts by means of controlled feedback, anonymity, statistical aggregation of group response, and iteration (Sourani & Sohaila, 2014: 56; Linstone & Turoff, 2002: 11; Rajendran, 2006: 110; Skulmoski, Hartman & Krahn, 2007: 2-3). In Round 1, extracted from extant literature, 50 initial statements were identified in seven components (mutuality, trust, enabling environment, personal characteristics, common purpose, institutional support, and project context) as factors that determine CHSA collaboration on construction projects. In Rounds 2 and 3, initial and additional statements relating to CHSA collaboration were identified and rated, using a 7-point Likert scale until consensus was reached. Likert scale measurement was used because statements could be analysed on the median rating for agreement of experts. Statements with the highest rating indicate that most of the experts agree that the statement or factor determines CHSA collaboration on construction projects.

# 3.1 Sampling and expert panel selection

Delphi sample sizes depend more on group dynamics in reaching consensus than on their statistical power (Okoli & Pawlowski, 2004: 19). The targeted population involved professionals and academics serving the CI that have the relevant abilities and knowledge about the study problem (Etikan, Musa & Alkassim, 2016: 3; Bhattacherjee, 2012: 69; Skulmoski et al., 2007: 3). The purposive sampling method (Welman, Kruger & Mitchell, 2005: 69; Chang & Karen, 2018: 317) was adopted to invite 45 experts from four sources, namely construction H&S literature, registered members of the Council for Research and Innovation in Building and Construction (CIB) on the CIB working commission (W099), authors or speakers who featured very prominently on the CIB W099 Conference Proceedings from 2010 to 2019, as well as registered construction professionals and academics who serve the South African built environment. Purposive sampling was used to ensure that all invited participants met the inclusion criteria, namely that all participants were required to already have obtained a registered qualification in the CI; be registered with a professional body, and have at least five years' experience in the CI, as well as field-specific knowledge (Boulkedid, Abdoul, Loustau, Sibony & Alberti, 2011:2; Skulmoski et al., 2007: 10; Avella, 2016: 310; Hallowell & Gambatese, 2010: 106). The

knowledge in construction H&S was considered to be compulsory for all selected experts and their willingness to participate throughout the entire study (Powell, 2003: 379; Avella, 2016: 310). All experts responded to Rounds one, two and three. In the Delphi process, general rules-of-thumb indicate that 14-30 people for a homogeneous population (that is, experts coming from the same discipline such as, for example, CI professionals) are generally considered to be sufficient to enable consensus to be achieved (Clayton, 1997: 378). Fourteen experts participated in three iterations.

#### 3.2 Data collection

Using the Delphi study technique, data were collected from three survey rounds between April and May 2021. In Round 1, a two-section semi-structured questionnaire was distributed among the 14 experts via email. In section one, experts were asked to rate the 50 statements related to seven factors, using a 7-point Likert scale, that would improve CHSA collaboration in the CI. In section two, the experts were asked to respond to an open statement: "Please list other additional factors that would encourage CHSA collaboration and list its related indicators or statements".

In Rounds 2 and 3, the comments provided in Round 1 were included in the questionnaire for Round 2 and Round 2 provided structure for Round 3. Six statements were dropped after Round 1 (Risks and rewards sharing encourages collaboration; professionalism supports collaboration; specialisation supports collaboration; flexibility on project schedule supports collaboration; training on information and technological resources, and availability of Internet for accessing H&S legislations) and three new statements (Trusting the roles more than individuals promotes collaboration; professional bodies to train CHSA on construction processes. and H&S legislations to require involvement of CHSA from stage one of the project) were added, based on experts' response to section two open question. These statements were retained in Rounds 2 and 3. The researcher compiled and communicated the results of each round to each expert in the form of individualised questionnaires. This included group medians. In Rounds 2 and 3, the experts were also asked to comment on their ratings, if the ratings differed from the group median. Statistical and qualitative feedback was provided to each expert in Round 3. The outcome of Round 3 indicated that there was a consensus and thus no need for Round 4. This finding concurs with previous studies (Skulmoski et al., 2007: 5; Hallowell, 2008: 89; Boulkedid et al., 2011: 7).

The comments included in the questionnaire were not linked to experts, in order to ensure anonymity. Anonymity allows panel members to interact freely without fear of intimidation or peer pressure (Donohoe, Stellefson & Tennant, 2012: 40), while controlled feedback allows every panel member

to receive individualised feedback and provide inputs into the entire process (Sourani & Sohaila, 2014: 56). Statistical group response allows for aggregation of responses in the form of group median. This can also be used to indicate consensus (Rajendran, 2006: 110), and iteration allows panel members to change their views (Linstone & Turoff, 2002: 11).

Experts were made aware of the fact that the study would be for academic purposes and as such no material benefit other than knowledge advancement and findings of the study. Inclusion and exclusion criteria were set to ensure that only those who understand and are able to make a decision about what is involved participate. The Delphi study did not require the age, gender, and name of the expert organisation. Confidentiality and anonymity were maintained throughout the study.

# 3.3 Analysis and interpretation of the data

Descriptive analysis was used for the respondents' profile information, in which the frequencies and percentages were generated and reported.

Microsoft Excel 2016 was used for data analysis and the results of each round were analysed using the median; open question responses were summarised qualitatively. The experts were required to rate their level of agreement on the factors/statements that would determine CHSA collaboration on construction projects and identify additional factors/ statements. The following 7-point Likert scale measurement was used regarding median value: 1 = strongly disagree; 2 = disagree; 3 = somewhat; 4 = neutral; 5 = somewhat; 6 = agree, and 7 = strongly agree. Cut-off values of group median 6 to 7 were required for reaching consensus and over 60% of the respondents rated the factors between 6 to 7. Previous studies mentioned similar criteria for reaching consensus in Delphi studies (von der gracht, 2012: 1529; Habibi, Sarafrazi & Izadyar, 2014: 11).

Although consensus is usually only reached when 100% of the experts agree, in this study 60% of the experts agreeing on each statement was considered sufficient to indicate common agreement. This is consistent with the studies by Chang, Gardner, Duffield & Ramis (2010: 2322), suggesting that 75% should be used for reaching consensus, and Agumba (2013: 150) using 50% for reaching consensus. Each statement was analysed individually for consensus.

#### 4. FINDINGS AND DISCUSSIONS

# 4.1 Demographic characteristics of experts

Table 1 shows the profile of experts. The vast majority of the experts were from South Africa; 42% of the experts had a Doctor of Philosophy (PhD)

degree; 50% of the experts were CHSAs, and 57% of the experts had over 10 years' experience in the CI. These experts were from Africa, Europe, Asia and North America. The Middle East, South America and Australia were not represented on the panel.

Table 1: Experts' profile

Demographic	Characteristic	Frequency	Percentage
Country	South Africa	9	64.28
	United Kingdom	1	7.14
	Nigeria	2	14.28
	Malaysia	1	7.14
	United States of America	1	7.14
	Total	14	100.00
Qualification	PhD	6	42.85
	Master of Science degree	2	14.28
	Bachelor Degree	4	28.57
	National Diploma	2	14.28
	Total	14	100.00
Professional registration	Construction project managers	2	14.28
	CHSAs	7	50.00
	Construction managers	2	14.28
	Engineer	1	7.14
	Construction health and safety manager	1	7.14
	Certified safety professional	1	7.14
	Total	14	100.00
Years of	1-5	3	21.42
experience	6-10	3	21.42
	11-15	1	7.14
	16-20	1	7.14
	21-25	2	14.28
	26-30	2	14.28
	31-40	2	14.28
	Total	14	100.00

Table 2 presents panel members' publication history. Based on publication, eight of the experts on the panel had published in peer-reviewed journals, conferences and books. Between them, they published 8 books, 10 chapters in books, 353 peer-reviewed journal articles, and 201 conference

papers. Five of the panel members served on the editorial board of journals; seven had served as referees or reviewers for journal publications, and six as referees for conference papers, while three have also served on the technical committee of the government department of employment and labour.

Table 2: Panel members' publication history

Expert publication	Number of publications
Peer-reviewed journals	353
Peer-reviewed conference papers	201
Editor or author of book	10
Author of a book chapter	8

#### 4.2 Factor results and discussions

The level of agreement was confirmed by evaluating the extent to which the identified factors and their related statements would determine CHSA collaboration on construction projects. Tables 3-9 show the results from Rounds 1, 2 and 3 of agreement medians. A higher score represented a higher level of agreement on the statement.

Table 3 presents the related statements of mutuality for CHSA collaboration. This factor was measured using six statements. All six statements achieved a median rating of between 6 to 7 and over 60% of the experts rated the statements between 6 to 7. Two statements, namely, respect among project members and transparency, attained a high median of 7, while the other four statements achieved a median of 6. This finding concurs with past studies (Henson, 1997: 79; Yuming, 2014: 61). The other four statements achieved a median rating of 6. This finding concurs with past studies, which

Table 3: Mutuality for construction health and safety agent collaboration

Mutuality		ement ians	% of responses	
	R1	R2	R3	(6-7)
Sharing information encourages collaboration	6	6	6	100
Equality in decision-making promotes collaboration	6	6	6	100
Respect among project members facilitates collaboration	7	7	7	100
Sharing responsibility for project activities promotes collaboration	6	6	6	100
Sharing knowledge that benefits others promotes collaboration	6	6	6	100
Transparency promotes collaboration	7	7	7	92

considered exchange of knowledge or ideas and equality in decision to be key indicators of mutuality (Henson, 1997: 80; Brinkerhoff, 2002: 23). The differences in the level of agreement of the related statements of mutuality point to the fact that experts strongly agree on the two statements and agree on the other four. The last column in Table 3 indicates that, for five statements, over three rounds, 100%, and for one statement, 92% of the experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 4 presents the related statements of trust for CHSA collaboration. This factor was measured using seven statements. Five out of the seven statements achieved the median rating between 6 to 7. This finding concurs with the study by Yuming (2014: 61). Similarly, according to Khalfan *et al.* (2007: 386), people tend to trust those who they think are competent. Only two related statements of trust dropped out, namely trusting the position rather than personality and trusting competence of individuals based on professional registration achieved a median of 4 and 5, respectively. Although these statements did not achieve the required median rating of 6 to 7, previous research suggests that personal role in the project, track record and professional standing are essential indicators of trustworthiness (Wong, Cheung, Yiu & Pang, 2008: 824). The importance of this finding was that trusting the position rather than personality and trusting competence of individuals based on professional registration were necessary despite their median rating of below 6. One of the experts mentioned that "developing

Table 4: Trust for construction health and safety agent collaboration

Trust		ement ans	% of responses	
	R1	R2	R3	(6-7)
An atmosphere of trust encourages collaboration	7	7	7	100
*Trusting the position rather than personality facilitates collaboration	4	4	4	21
Trusting that individuals will fulfil their obligations encourages collaboration	6	6	6	92
Trusting individuals based on previous interactions and experience promotes collaboration	6	6	6	100
Trusting the competence of individuals based on education background promotes collaboration	5	5	6	64
*Trusting the competence of individuals based on professional registration promotes collaboration	4	5	5	7
Trusting the roles more than the individuals promotes collaboration (statement was added after Round 1)	0	6	6	92

<sup>\*</sup> statement dropped out

trust in someone takes time and is based on character and competence, not personality". The values provided in the last column in Table 4 indicate that, over three rounds, for two statements, 100% of experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 5 presents the related statements of enabling environment for CHSA collaboration. All six statements achieved the required median rating of 6 to 7. Based on the comprehensive literature, enabling environment was identified as one of the main factors for collaboration (Roberts *et al.*, 2016: 4). While lack of communication can undermine the effectiveness of collaboration, frequent communication helps adjust project strategies (Yuming, 2014: 120). Similarly, an environment, in which decisions are made jointly and in the interest of all parties (Jackson *et al.*, 2017: 557), promotes collaboration, while the environment of open communication improves certainty and reliability of the behaviours of those involved (Yuming, 2014: 62). A situation where one believes that others can contribute meaningfully to the decision-making (Henson, 1997: 79) is likely to exist when there are no power imbalances. The values provided in the last column in Table 5 indicate that, over three rounds, for four statements, 100% of the experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 5: Enabling environment for construction health and safety agent collaboration

Enabling environment		ment m	% of		
	R1	R2	R3	responses (6-7)	
Joint decision-making encourages collaboration	6	6	6	100	
Frequent communication encourages collaboration	6	6	6	100	
Sharing power between project members encourages collaboration	6	6	6	100	
Collective contributions encourage collaboration	6	6	6	100	
Collaboration is encouraged when leaders of an organisation support collaboration	6	6	6	78	
Committed project team encourages collaboration	6	6	6	92	

Table 6 presents the related statements of personal characteristics for CHSA collaboration. This factor was measured by eight statements and all statements achieved a median rating of 6 to 7 and over 60% of the experts rated the statements between 6 to 7. Two statements, namely willingness to collaborate and respecting the inputs of others had a median of 7. This finding indicates that project members tend to collaborate more when their inputs are appreciated. A previous study indicated that respecting the

Table 6: Personal characteristics for construction health and safety agent collaboration

Personal characteristics		ment me	% of	
	R1	R2	R3	responses (6-7)
Willingness to collaborate	7	7	7	100
Respecting inputs of others	7	7	7	100
Placing project interests above individual interests	6	6	6	92
Knowledge of design process	6	6	6	92
Knowledge of procurement management	6	6	6	92
Knowledge of construction process	6	6	6	92
Knowledge of financial and cost	6	6	6	92
Knowledge of H&S management	6	6	6	100

contributions and ideas of others encourages collaboration (D'Amour *et al.*, 2005: 119). This finding concurs with previous studies that personal characteristics have significant influence on collaboration (Bronstein, 2003: 304; Roberts *et al.*, 2016: 4). Therefore, experts agree that CHSA collaboration is possible by acquiring knowledge in design, procurement, construction process, financial and cost, and H&S management. Put differently, collaborating with other project team members requires CHSA to have knowledge in these areas. The values provided in the last column in Table 6 indicate that, over three rounds, for three statements, 100% of the experts and for five statements, 92% of the experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 7 presents the related statements of common purpose for CHSA collaboration. Six statements were used to measure this factor. All the six statements had an agreement median rating within the cut-off 6 to 7 and over 60% of the experts rated the statements between 6 to 7. Common purpose is the central factor of collaboration as it helps bring other factors together (Yuming, 2014: 61). Some of the findings are similar to those of Faris *et al.* (2019: 8-9). The study by Dietrich *et al.* (2010: 59) emphasizes the importance of joint creation of value for overcoming the lack of resources and skills. Not only is having a shared goal critical for collaboration; it also improves communication (Khalfan *et al.* 2007: 387). The values provided in the last column in Table 7 indicate that, over three rounds, for four statements, 100% of the experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 7: Common purpose for construction health and safety agent collaboration

Common purpose		ment m	% of	
	R1	R2	R3	responses (6-7)
Committing to the project vision supports collaboration	6	6	6	100
Joint working in pursuing common purpose supports collaboration	6	6	6	100
A clear vision promotes collaboration	6	6	6	100
Collaboration is encouraged by shared vision	6	6	6	100
Setting common goals between project members encourages collaboration	7	6	6	92
Joint creation of value encourages collaboration	6	6	6	92

Table 8 presents the related statements of institutional support for CHSA collaboration. This factor was measured by nine statements. Six of the nine statements achieved the median rating between 6 to 7. This finding shows that experts somewhat agreed on the other three statements, while there was agreement on six statements. This is particularly important, as H&S professionals learn the H&S requirements from government regulatory

Table 8: Institutional support for construction health and safety agent collaboration

Institutional support		ment m	% of	
	R1	R2	R3	responses (6-7)
*Provision of information and technological resources	5	5	5	7
*Availability of building information modelling	5	5	5	14
Use of integrated project delivery method	6	6	6	85
*Government H&S authorities provide updated H&S legislations	4	5	5	14
Government H&S authorities provide guidance to ensure adherence to H&S legislations	5	5	6	71
Professional bodies provide guidance to ensure implementation of H&S legislations	5	5	6	71
Professional bodies to provide training on new H&S practices	5	5	6	64
Professional bodies to train CHSA on construction processes (statement was added after Round 1)		6	6	92
H&S legislations to require involvement of CHSA from stage one of the project (statement was added after Round 1)		6	6	92

<sup>\*</sup>statement dropped out

authorities (Wang, Wu & Haung, 2019: 16; Swuste, Zwaard, Groeneweg & Guldenmund, 2015: 85-86) and values, standards, and codes from professional bodies (Ju & Rowlinson, 2013: 350). According to Azhara, Kanga & Ahmad (2014: 215), the use of the integrated project delivery method allows a project team to effectively collaborate throughout project stages. The result further suggests that H&S legislations can determine the need of CHSA on the project. Deacon (2016: 203) and Mwanaumo (2013: 279) highlighted the role of H&S legislations in determining the need of CHSA. However, one of the experts remarked that "project members still do not respect CHSA contributions to the project because they only call CHSA at stage four when they need a construction work permit."

Only three statements of institutional support dropped out. Their median rating for agreement was below the cut-off point of 6 and less than 60% of the experts rated the statements within the cut-off point of 6 to 7. Although provision of information and technological resources and availability of building information modelling were rated below a cut-off point of 6, a previous study by Yuming (2014: 64) posited that collaboration requires reliable access to the latest technological knowledge and resources. Likewise, Azhara et al. (2014: 219) highlighted that building information modelling has the potential to facilitate collaboration. However, one of the experts mentioned that "technologies such as the use of building information modelling does not create collaboration by default but things such as emotional intelligence and interpersonal soft skills are what makes it work". The values provided in the last column in Table 8 indicate that, for two statements, over Rounds 2 and 3, 92% of the experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 9 presents the related statements of project context for CHSA collaboration. This factor was measured using eight statements. Seven of the eight identified statements had a median of 6, while one had a median of 5. These support the finding of Larson and Gobeli (1989: 123) which revealed that clearly defined objectives were the strongest and consistent predictor of project success. It also supports the finding of Faris *et al.* (2019: 5) and of lyer (2015: 38). Based on the findings, it is suggested that lack of clear project roles and objectives may cause other project members to be less likely to engage in collaborative efforts. Only one statement of project context dropped out. Although this statement was rated below a cutoff point of 6, a previous study by Patel *et al.* (2012: 7) emphasises the need of access to adequate resources such as finance, time and equipment, in order to complete the task. The values provided in the last column in Table 9 indicate that, over three rounds, for five statements, 100% of the experts rated the statement between 6 and 7 on a Likert scale measurement.

Table 9: Project context for construction health and safety agent collaboration

Project context		ement r	% of		
	R1	R2	R3	responses (6-7)	
Clear project roles	6	6	6	100	
Clearly defined project objectives	6	6	6	100	
Communication promotes collaboration	6	6	6	92	
Project organisational structure supports collaboration between project members	6	6	6	100	
*Financial resources are made available to all disciplines for completing the project	5	5	5	7	
Different disciplines work jointly to deal with the complexity of the project	6	6	6	92	
Good relationships promote collaboration	6	6	6	100	
Sharing of knowledge supports collaboration	6	6	6	100	

<sup>\*</sup>statement dropped out

Experts were used to identify and validate the factors that determine CHSA collaboration on construction project. Experts agreed on 44 statements of seven factors based on the cut-off point of 6 and over 60% of the experts rated the factor between 6 to 7. The finding not only confirms that these factors are necessary for collaboration, but it also provides the level of agreement regarding CHSA collaborating with other project team members in a construction project. It can also be concluded that CHSA is more likely to collaborate with project team members in a construction project when there is mutuality, trust, enabling environment, personal characteristics, common purpose, institutional support, and project context.

#### 5. CONCLUSION AND RECOMMENDATIONS

Research on the value of persons managing H&S is critical, as CI continues to suffer poor H&S performance. The poor H&S performance is exacerbated by poor collaboration between CHSA and other project actors. The ability of CHSAs to collaborate with other professionals is critical to their long-term existence in the CI. This motivated the current study to identify the factors that determine CHSA collaboration on construction projects. This objective was achieved through conducting a Delphi study involving three rounds. It was found that the critical factors that determine CHSA collaboration are mutuality, trust, an enabling environment, personal characteristics, common purpose, institutional support, and project context.

It can be concluded that the influence of CHSA on construction projects is dependent on collaboration and that construction organisations should

pay attention to these seven factors for improving CHSA collaboration. These factors should be identified, implemented, and monitored in order to increase the influence of CHSA. The study not only confirmed that these factors were necessary for collaboration, but it also provided the level of agreement regarding CHSA collaborating with other project team members in a construction project.

The study was limited to a panel of 14 experts and more experts could have provided more information. The factors that determine CHSA collaboration identified in this study may not be exhaustive and another study may provide different factors. Further research could adopt other research methods such as quantitative to determine the impact of these seven factors on CHSA collaboration. Similar studies can use a Delphi study for reaching concrete conclusions.

#### REFERENCES

Agumba, J. 2013. A construction health and safety performance improvement model for South African small and medium enterprises. PhD thesis. South Africa: University of Johannesburg.

Akintan, O. & Morledge, R. 2013. Improving the collaboration between main contractors and subcontractors within traditional construction procurement. *Journal of Construction Engineering*, vol. 2013, Article ID 281236, pp. 1-15. https://doi.org/10.1155/2013/281236

Akintoye, A., McIntosh, G. & Fitzgerald, E. 2000. A survey of supply chain collaboration and management in the UK construction industry. European *Journal of Purchasing & Supply Management*, 6(3-4), pp. 159-168. https://doi.org/10.1016/S0969-7012(00)00012-5

Amabile, T.M., Patterson, C., Mueller, J., Wojcik, T., Kramer, S.J., Odomirok, P.W. & Marsh, M. 2001. Academic-practitioner collaboration in management research: A case of cross-profession collaboration. *Academy of Management Journal*, 44(2), pp. 418-431. https://doi.org/10.2307/3069464

Aulin, R. & Capone, P. 2010. The role of health and safety coordinator in Sweden and Italy construction industry. In: *Proceedings of the W099 – Special Track 18<sup>th</sup> CIB World Building Congress.* CIB Publication 357, 10-13 May. The Lowry, Salford Quays, United Kingdom, pp. 93-106.

Avella, J.R. 2016. Delphi panels: Research design, procedures, advantages, and challenges. *International Journal of Doctoral Studies*, vol. 11, pp. 305-321. https://doi.org/10.28945/3561

Azhara, N., Kanga, Y. & Ahmad, U.I. 2014. Factors influencing integrated project delivery in publicly owned construction projects: An information

modelling perspective. *Procedia Engineering*, vol. 77, pp. 213-221. https://doi.org/10.1016/j.proeng.2014.07.019

Badri, A., Gbodossou, A. & Nadeau, S. 2012. Occupational health and safety risks: Towards the integration into project management. *Journal of Safety Science*, vol. 50, pp. 190-198. https://doi.org/10.1016/j.ssci.2011.08.008

Barraket, J. & Loosemore, M. 2018. Co-creating social value through crosssector collaboration between social enterprises and the construction industry. *Construction Management and Economics*, 36(7), pp. 394-408. https://doi.org/10.1080/01446193.2017.1416152

Benjaoran, V. & Bhokha, S. 2010. An integrated safety management with construction management using 4D CAD model. *Journal of Safety Science*, vol. 48, pp. 395-403. https://doi.org/10.1016/j.ssci.2009.09.009

Bhattacherjee, A. 2012. Social science research: Principles, methods and practices. Second edition. Textbooks Collection 3. Tampa, Florida: University of South Florida.

Borys, D. 2014. The value proposition for the occupational health and safety professional: Literature review: A report from the International Network of Safety & Health Practitioner Organisations (INSHPO).

Boulkedid, R., Abdoul, H., Loustau, M., Sibony, O. & Alberti, C. 2011. Using and reporting the Delphi method for selecting healthcare quality indicators: A systematic review. *Plos ONE*, 6(6): e20476. https://doi.org/10.1371/journal.pone.0020476

Brady, S.R. 2015. Utilizing and adapting the Delphi method for use in qualitative research. *International Journal of Qualitative Methods*, 14(5), pp. 1-6. https://doi.org/10.1177/1609406915621381

Brinkerhoff, J.M. 2002. Government non-profit partnership: A defining framework. *Public Administration and Development*, 22(1), pp. 19-30. https://doi.org/10.1002/pad.203

Bronstein, R.L. 2003. A model for interdisciplinary collaboration. *Social Work*, 48(3), pp. 297-306. https://doi.org/10.1093/sw/48.3.297

Camarinha-Matos, L.M. & Afsarmanesh, H. 2008. Concept of collaboration. In: Putnik, G. & Cunha, M. (Eds). *Encyclopedia of networked and virtual organizations*. Hersley, PA: IGI Global, pp. 311-315. https://doi.org/10.4018/978-1-59904-885-7.ch041

Camarinha-Matos, L.M., Afsarmanesh, H., Galeano, N. & Molina, A. 2009. Collaborative networked organisations – Concepts and practice in manufacturing enterprises. *Journal of Computers and Engineering*, vol. 57, pp. 46-60. https://doi.org/10.1016/j.cie.2008.11.024

Cameron, I., Hare, B. & Duff, R. 2013. An analysis of safety advisor roles and site safety performance. *Engineering, Construction and Architectural Management*, 20(5), pp. 505-521. https://doi.org/10.1108/ECAM-01-2012-0002

Chang, A.M. & Karen, Y. 2018. Beyond consensus: A review of Delphi research published in Malaysian social science journals. *International Journal of Business and Society*, 19(2), pp. 312-323.

Chang, A.M., Gardner, G.E., Duffield, C. & Ramis, M.A. 2010. A Delphi study to validate an advanced practice nursing tool. *Journal of Advanced Nursing*, 66(10), pp. 2320-2330. https://doi.org/10.1111/j.1365-2648.2010.05367.x

Chunxiang, W. 2012. Safety responsibilities for owner and example in public works. International Symposium on Safety Science and Engineering in China. *Procedia Engineering*, vol. 43, pp. 523-527. https://doi.org/10.1016/j. proeng.2012.08.091

Clayton, M.J. 1997. Delphi: A technique to harness expert opinion for critical decision-making tasks in education. *Educational Psychology*, 17(4), pp. 373-386. https://doi.org/10.1080/0144341970170401

D'Amour, D., Ferrada-Videla, M., Rodriquez, L. & Beaulieu, M. 2005. The conceptual basis for interprofessional collaboration: Core concepts and theoretical frameworks. *Journal of Interprofessional Care*, vol. 19, pp. 118-206. https://doi.org/10.1080/13561820500082529

Deacon, C. 2016. The effect of the integration of design, procurement, and construction relative to health and safety. Unpublished PhD thesis. Nelson Mandela University, Port Elizabeth, South Africa.

Deep, S., Gajendran, T. & Jefferies, M. 2019. A systematic review of 'enablers of collaboration' among the participants in construction projects. *International Journal of Construction Management* published online: 2 April 2019. https://doi.org/10.1080/15623599.2019.1596624

Department of Public Works. 2014. *Construction Regulations launch: Address by the Minister of Public Works.* Birchwood Hotel, Boksburg, South Africa, 10 February 2014.

Dietrich, P., Eskerod, P., Dalcher, D. & Sandhawalia, B. 2010. The dynamics of collaboration in multi-partner projects. *Project Management Journal*, 41(4), pp. 59-78. https://doi.org/10.1002/pmj.20194

Donohoe, H., Stellefson, M. & Tennant, B. 2012. Advantages and limitations of the e-Delphi technique. *American Journal of Health Education*, 43(1), pp. 38-46. https://doi.org/10.1080/19325037.2012.10599216

Erickson, A.J. 2016. Interdisciplinary: Increasing safety performance. *Professional Safety*, vol. 61, pp. 26-32.

Etikan, I., Musa, A.S. & Alkassim, S. 2016. Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*, 5(1), pp.1-4. https://doi.org/10.11648/j.ajtas.20160501.11

Faris, H., Gaterell, M. & Hutchinson, D. 2019. Investigating underlying factors of collaboration for construction projects in emerging economies using exploratory factor analysis. *International Journal of Construction Management*, published online: 4 July 2019. https://doi.org/10.1080/1562 3599.2019.1635758

Goldswain, C.C. 2014. Architectural design interventions toward improvement of construction health, safety and ergonomics in South Africa. PhD thesis. Nelson Mandela Metropolitan University, Port Elizabeth, South Africa.

Habibi, A., Sarafrazi, A. & Izadyar, S. 2014. Delphi technique theoretical framework in qualitative research. *The International Journal of Engineering and Science*, 3(3), pp. 8-13.

Hallowell, M.R. & Gambatese, J. 2010. Qualitative research: Application of the Delphi method to CEM research. *Journal of Construction Engineering and Management*, 136(1), pp. 99-107. https://doi.org/10.1061/(ASCE) CO.1943-7862.0000137

Hallowell, R.M. 2008. A formal model for construction safety and health risk management. PhD thesis. Oregon State University, Corvallis, Oregon.

Hasanzadeha, M.S., Hosseinalipourb, M. & Hafezi, M. 2014. Collaborative procurement in construction. *Procedia – Social and Behavioral Sciences*, vol. 119, pp. 811-818. https://doi.org/10.1016/j.sbspro.2014.03.091

Health and Safety Executive. 2015. Managing health and safety in construction: Construction: (Design and Management) Regulations 2015. Guidance on Regulations. London, UK: HSE books. ISBN 9780717666263.

Henson, H.R. 1997. Analysis of the concept of mutuality. *Journal of Nursing Scholarship*, 29(1), pp. 77-81. https://doi.org/10.1111/j.1547-5069.1997. tb01144.x

Hughes, D. 2018. Development of an effective model for collaboration within the UK construction industry. Unpublished PhD thesis. University of South Wales, Pontypridd, Wales.

lyer, R.V. 2015. Engaging a multi-disciplinary literature review in the development of a framework to assess construction collaboration. Masters degree. Texa A&M University, College Station, Texas.

Ju, C. & Rowlinson, S. 2013. Institutional determinants of construction safety management strategies of contractors in Hong Kong. In: Smith, S.D. & Ahiaga-Dagbui, D.D. (Eds). *Proceedings of the 29<sup>th</sup> Annual ARCOM Conference*, 2-4 September. Reading, UK: Association of Researchers in Construction Management, pp. 347-356.

Khalfan, M.M.A., McDermott, P. & Swan, W. 2007. Building trust in construction projects. *Journal of Supply Chain Management*, 12(6), pp. 385-391. https://doi.org/10.1108/13598540710826308

Larsson, T.J. & Almen, L. 2014. Health and safety coordinators in building projects. *Built Environment Project and Asset Management*, 4(3), pp. 251-263. https://doi.org/10.1108/BEPAM-05-2013-0012

Larson, W.E. & Gobeli, H.D. 1989. Significance of project management development success. *IEEE Transactions on Engineering Management*, 36(2), pp. 119-125. https://doi.org/10.1109/17.18828

Linstone, H.A. & Turoff, M. 2002. *The Delphi method: Techniques and application*. Reading, MA: Addison-Wesley Pub. Co., Advanced Book Program.

Liu, Y., Van Nederveen, S. & Hertogh, M. 2017. Understanding effects of BIM on collaborative design and construction. An empirical study in China. *International Journal of Project Management*, vol. 35, pp. 686-698. https://doi.org/10.1016/j.ijproman.2016.06.007

Lu, W., Zhang, D. & Rowlinson, S. 2013. BIM collaboration: A conceptual model and its characteristics. In: Smith, S.D. & Ahiaga-Dagbui, D.D. (Eds). *Proceedings of the 29<sup>th</sup> Annual ARCOM Conference*, 2-4 September. Reading, UK: Association of Researchers in Construction Management, pp. 25-34.

Manu, P., Emuze, F., Saurin, T.A. & Hadikusumo, H.W. 2020. *Construction health and safety in developing countries*. New York: Routledge Taylor & Francis Group. https://doi.org/10.1201/9780429455377

Mattessich, P.W. & Monsey, B.R. 1992. *Collaboration: What makes it work.* Saint Paul, MN: Amherst H. Wilder Foundation.

Msomba, P.Z., Matiko, S. & Mlinga, R.S. 2018. Identification of enabling factors for collaboration in management of risk in construction projects: A literature review. *International Journal of Engineering Research & Technology*, 7(2), pp. 152-159. https://doi.org/10.17577/IJERTV7IS020083

Mwanaumo, M. 2013. An integrated approach to multi-stakeholder interventions in construction health and safety. Unpublished PhD thesis. University of Johannesburg, Johannesburg, South Africa.

Neale, R. 2013. An assessment of the implemented occupational health and safety practices in Botswana construction industry. *African Newsletter on Occupational Health and Safety. Construction*, 23(3), pp. 52-54.

Nielsen, J.K. 2014. Improving safety culture through the health and safety organisation. *Journal of Safety Research*, vol. 48, pp. 7-17. https://doi.org/10.1016/j.jsr.2013.10.003

Okoli, C. & Pawlowski, S.D. 2004. The Delphi method as a research tool: An example, design considerations and applications. *Information & Management*, vol. 42, pp. 15-29. https://doi.org/10.1016/j.im.2003.11.002

Ozturk, G.B. 2019. The relationship between BIM implementation and individual level collaboration in construction projects. *IOP Conference Series: Materials Science and Engineering*, 471(2), pp. 1-8. https://doi.org/10.1088/1757-899X/471/2/022042

Pal, R., Wang, P. & Liang, X. 2017. The critical factors in managing relationships in international engineering, procurement and construction (IEPC) projects of Chinese organisations. *International Journal of Project Management*, 35(7), pp. 1225-1237. https://doi.org/10.1016/j.ijproman.2017.05.010

Patel, H., Pettitt, M. & Wilson, J. 2012. Factors of collaborative working: A framework for a collaboration model. *Journal of Applied Ergonomics*, 43(1), pp. 1-26. https://doi.org/10.1016/j.apergo.2011.04.009

Powell, C. 2003. The Delphi technique: Myths and realities. *Journal of Advanced Nursing*, 41(4), pp. 376-382. https://doi.org/10.1046/j.1365-2648.2003.02537.x

Provan, D.J., Dekker, S.W.A. & Rae, A.J. 2017. Bureaucracy, influence and beliefs: A literature review of the factors shaping the role of a safety professional. *Journal of Safety Science*, vol. 98, pp. 98-112. https://doi.org/10.1016/j.ssci.2017.06.006

Rajendran, S. 2006. Sustainable construction safety and health rating system. Civil Construction and Environmental Engineering. PhD thesis. Oregon State University Corvallis, Oregon.

Rantsatsi, N., Musonda, I. & Agumba, J. 2020. Identifying factors of collaboration critical for improving health and safety performance in construction projects: A systematic literature review. *Acta Structilia*, 27(2), pp. 120-150. https://doi.org/10.18820/24150487/as27i2.5

Rebbitt, D. 2012. The value proposition of safety professionals: Do safety professionals actually reduce fatalities? Masters thesis. Athabasca University, Athabasca, Canada.

Roberts, D., Van Wyk, R. & Dhanpat, N. 2016. Exploring practices for effective collaboration. In: *Proceedings of the 28<sup>th</sup> Annual Conference of the Southern African Institute of Management Scientists*, 4-7 September. Pretoria, South Africa, pp. 001-013. ISBN: 978-0-620-71797-7.

SACPCMP (South African Council for Project and Construction Management Professions). 2013. Registration rules for construction health and safety agents in terms of Section 18(1)c of the Project and Construction Management Professions Act, Act No. 48 of 2000. Midrand: SACPCMP.

Samuel, L. 2017. Labour on injuries and fatalities in SA construction sector. [Online]. Available at: <a href="https://www.gov.za/speeches/sa-construction-sector-9-mar-2017-0000">https://www.gov.za/speeches/sa-construction-sector-9-mar-2017-0000</a>. [Accessed: 9 March 2017].

Sinelnikov, S., Inouye, J. & Kerper, S. 2015. Using leading indicators to measure occupational health and safety performance. *Safety Science Journal*, vol. 72, pp. 240-248. https://doi.org/10.1016/j.ssci.2014.09.010

Skulmoski, J., Hartman, T. & Krahn, J. 2007. Delphi method for graduate research. *Journal of Information Technology Education*, 6(1), pp. 1-21. https://doi.org/10.28945/199

Smallwood, J.J. & Deacon, C. 2017. The performance of construction health and safety agents. In: *Proceedings of the 9<sup>th</sup> International Structural Engineering and Construction Conference* (ISEC9), 24-28 July. Valencia, Spain, pp. 1174-1180.

Smith, A.P. & Wadsworth, E.J. 2009. Safety culture, advice and performance. *Policy and Practice in Health and Safety*, 7(1), pp. 5-31. https://doi.org/10.1080/14774003.2009.11667726

Sourani, A. & Sohaila, M. 2014. The Delphi method: Review and use in construction management research. *International Journal of Construction Education and Research*, 11(1), pp. 1-23. https://doi.org/10.1080/1557877 1.2014.917132

Swuste, P., Zwaard, W., Groeneweg, J. & Guldenmund, F. 2015. Safety professionals in The Netherlands. *Journal of Safety Science*, vol. 114, pp. 79-88. https://doi.org/10.1016/j.ssci.2018.12.015

Thomson, A.M., Perry, J. & Miller, T. 2007. Conceptualizing and measuring collaboration. *Journal of Public Administration Research and Theory*, 19(1), pp. 23-56. https://doi.org/10.1093/jopart/mum036

Torneman, C. 2015. Collaboration in construction project delivery: Strategic implications technical consultancy firms. Unpublished Master's thesis in design and construction project management. Chalmers University of Technology, Gothenburg, Sweden.

von der Gracht, H. 2012. Consensus measurement in Delphi studies Re-opinion and implications for future quality assurance. *Technological Forecasting & Social Change*, vol. 79, pp. 1525-1536. https://doi.org/10.1016/j.techfore.2012.04.013

Wang, B., Wu, C. & Huang, L. 2019. Data literacy for safety professionals in safety management: A theoretical perspective on basic questions and answers. *Journal of Safety Science*, vol. 117, pp. 15-22. https://doi.org/10.1016/j.ssci.2019.04.002

Welman, C., Kruger, F. & Mitchell, B. 2005. *Research methodology*. 3<sup>rd</sup> edition. Cape Town, South Africa: Oxford University Press Southern Africa.

Wong, W., Cheung, S., Yiu, T. & Pang, H. 2008. A framework for trust in construction contracting. *International Journal of Project Management*, vol. 26, pp. 821-829. https://doi.org/10.1016/j.ijproman.2007.11.004

Wu, T C., Lin, C.H. & Shiau, S.Y. 2010. Predicting safety culture: The roles of employer, operations manager and safety professional. *Journal of Safety Research*, 41(5), pp. 423-431. https://doi.org/10.1016/j.jsr.2010.06.006

Ylitalo, J., Eerikki, M. & Ziegler, K. 2004. Evolvement of trust and mutuality in early stages of interorganisational collaboration. In: Seppä, M., Hannula, M., Järvelin, A-M., Kujala, J., Ruohonen, M. & Tiainen, T. (Eds). *Frontiers of e-business research 2004 Conference Proceedings*, Vol. 2, 20-22 September. Tampere, Finland, pp. 546-560.

Yuming, H. 2014. An empirical study of partners' collaboration in construction joint venture (CJV) projects and its impacts on project performance in Hong Kong. PhD thesis. The Hong Kong Polytechnic University, Hong Kong.

Zheng, W., Yang, B. & McLean, N.G. 2013. Linking organizational culture, structure, strategy, and organizational effectiveness: Mediating role of knowledge management. *Journal of Business Management*, 63(7), pp. 763-771. https://doi.org/10.1016/j.jbusres.2009.06.005