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## **Race equality scheme for the Health and Safety Commission and Health and Safety Executive 2005-2008**

The Health and Safety Executive hopes that publication of this Discussion Document will stimulate consideration and discussion of the issues raised. We would like to hear your views about this race equality scheme.

You are welcome to comment on any aspect of its contents, though we would particularly value feedback concerning the Race Equality Action Plan for 2005-2006, priorities C and D.

The Race Equality Action Plan covers the first year of the race equality scheme. If there are particular issues that you would like to see addressed in the next Action Plan (2006-2007), please let us know.

The scheme can also be accessed via our website: [www.hse.gov.uk/consult/](http://www.hse.gov.uk/consult/)

Any responses to this document would be welcome and should be sent to:

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To reach us no later than 30 September 2005

The Commission tries to make its consultation procedure as thorough and open as possible. Responses to this discussion document will be lodged in the Health and Safety Executive's Information Centres after the close of the consultation period where they can be inspected by members of the public or be copied to them on payment of the appropriate fee to cover costs.

Responses to this discussion document are invited on the basis that anyone submitting them agrees to their being dealt with in this way. Responses, or part of them, will be withheld from the Information Centres only at the express request of the person making them (Under the Code of Practice on Access to Government Information; Environmental Information Regulations 1992 and the Data Protection Act 1998). In such cases a note will be put in the index to the responses identifying those who have commented and have asked that their views, or part of them, be treated as confidential.

Many business e-mail systems now automatically append a paragraph stating the message is confidential. If you are responding to this DD by e-mail and you are content for your responses to be made publicly available, please make clear in the body of your response that you do not wish any standard confidentiality statement to apply.

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DISCUSSION  
DOCUMENT

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## **Introduction**

### ***Previous editions of the HSC/E race equality scheme***

*Like other public bodies, the Health and Safety Commission (HSC) and the Health and Safety Executive (HSE) are required to publish a race equality scheme, which sets out how we plan to meet our duties under the Race Relations Act 1976 as amended by the race Relations (Amendment) Act 2000 and the Code of Practice on the Duty to Promote Race Equality. These duties are both general and specific and are outlined in Annex A.*

*Because of the interdependence of the HSE and HSC, and the integration of their work, with regard to the promotion of race equality it was decided that they should be considered as one body, committed to a single, joint race equality scheme. The first race equality scheme for HSC and HSE covered the period 2002-2005. It was published for consultation in May 2002 and an amended version, which incorporated feedback from the consultation process and evaluation of the first year of the scheme's operation, was published in September 2003: [www.hse.gov.uk/aboutus/hsc/res.pdf](http://www.hse.gov.uk/aboutus/hsc/res.pdf)*

### ***Progress made and lessons learned***

*A short internal review has been carried out to learn the lessons of operating the first three years of the scheme: both the original race equality scheme, published in May 2002, and the second edition, published in September 2003.*

*The results of the assessment (Annex B) highlight a need for:*

*A clear **vision**, with demonstrated top-level commitment*

*A focus on the **business benefits** of the scheme*

*A commitment to **few high-impact** actions*

### ***Corporate commitment to diversity***

*The assessment of the race equality scheme coincided with a broader review of how HSE can improve the way in which it operates in an increasingly diverse society. In July 2005, HSE published a vision on diversity (Annex C) and identified eight key priorities for realising the vision (Annex D). The vision incorporates race equality values, principles and standards as well as the strategic aims we aspire to achieve.*

*The revised race equality scheme, therefore, contributes to a broader strategy for the promotion of diversity and draws on the lessons learned from a wider review of diversity as well as that of the earlier race equality scheme.*

## ***The 2005 Race Equality Scheme – striving for excellence***

*The current edition of the scheme is designed to address the areas where potential for improvement has been identified. Where important work has been undertaken in the first three years of the scheme, for example equality proofing our personnel procedures and our policy on communications with non-English speakers, this will continue.*

*We have set out and updated the ways in which we will meet our duties to promote race equality over the next 3 years. We have a clear strategy for meeting our general and specific duties (Annex A) as a public body (Annex E and Annex F) as well as arrangements for meeting our specific duties as an employer (Annex G).*

*In order to meet the priority requirements identified during our review process, outlined above, we have:*

*Articulated a board **vision** on diversity, published in July 2005*

*Drawn up an **Action Plan** for the first year of the scheme, which identifies **few, high impact** priority activities,*

*The rest of this document sets out:*

- ❖ *The race equality Action Plan 2005-2008*
- ❖ *Race equality targets and performance indicators*
- ❖ *Procedures for dealing with complaints*
- ❖ *Consultation processes*
- ❖ *Methods for review*

## **Race Equality Action Plan for 2005-2006**

*The Action Plan sets out the key priorities of the race equality scheme for 2005-2008 and associated actions that HSC/E has set itself in relation to race during the first year of the scheme. Targets and milestones for these priorities will be agreed and published in October 2005. The Action Plan will be reviewed, updated and published on an annual basis during the life of the scheme.*

### **Overarching Priority:**

#### **A. We will raise awareness amongst our staff of the business benefits of diversity.**

*Actions:*

- 1. Publicise the Board's vision for diversity and place it on our intranet; and*
- 2. Publish examples of good practice in our in-house magazine.*

### **External Diversity Priorities:**

#### **B. We will build - and make better use of - the evidence base in our policies and operations.**

*Actions:*

- 3. Review the results of research already carried out to:*
  - counteract different experiences of risk where the results show scope for action; and*
  - assess what further needs to be done to build and make better use of the evidence base.*

#### **C. We will design interventions to take account of the different needs of, and impact on, particular ethnic minority groups.**

*Actions:*

- 4. Assess the impact on different groups – with a strong emphasis on race - of the priority and enabling programmes on which HSE's work is now focused. Where proposals for change to these programmes are made, we will ensure that fuller race impact assessments are carried out as part of a wider diversity assessment;*
- 5. Carry out a Race Impact Assessment as part of the project to roll out Workplace Health Direct as a service with national coverage and review the experience to inform impact assessments done in relation to subsequent proposals;*

*The work on impact assessment will be carried out by the owners of the particular programmes but will be supported by:*

- Better guidance to owners of programmes on how such impact assessments should be carried out taking account of developing guidance from CRE and the Cabinet Office;*
- Better guidance on consultation with ethnic minority organisations; and*

- *More effective support from the central diversity teams in Personnel Division and Policy Division*

**D. We will reach out to people/organisations with particular understanding of diversity to improve our policies and practices and to ensure our advice and information is accessible.**

*Actions:*

6. *Research and create a stakeholder engagement plan, which lists and prioritises the most appropriate people/organisations to be approached*

***Internal Diversity Priorities:***

**E. As part of our workforce strategy, continue to improve the diversity of our workforce.**

*Action:*

7. *Increase recruitment from ethnic minority groups for both specialist and non-specialist posts through promoting HSE as an organisation which welcomes and values diversity and has a wide range of future career opportunities.*

**F. We will continue and develop positive action to enable under-represented ethnic minority groups to develop the skills to progress upward more quickly.**

*Action:*

8. *Focus on the development of minority ethnic staff through:*
  - *Encouragement by line management to reduce potential feelings of isolation; and*
  - *Provide examples of more attractive role models.*

**G. We will encourage and support staff networks**

*Action:*

9. *Develop the minority ethnic network as a key agent for change.*

## **Race equality targets and performance indicators**

### **External targets**

*The absence of existing data on the impacts of HSC and HSE policies make it difficult to set specific targets and indicators at this stage. Therefore, our targets will be those set out in our action plan. Our performance indicators will be the effective completion of the tasks in accordance with the timescale.*

*The establishment of effective monitoring regimes is a high priority in our action plan and one with which we are making progress. As monitoring provides baseline information on our current performance, we will amend our equality targets and performance indicators accordingly.*

### **Internal targets**

*The target we have set ourselves for internal ethnic minority representation for 2005 was established following publication of the Cabinet Office benchmark for the Senior Civil Service (SCS) in April 1999 under the Modernising Government Agenda. The benchmark for ethnic minority representation in the SCS by 2005 is 3.2%.*

*It was clear, however, from our analysis that it would be virtually impossible for HSE to achieve the target. This is mainly due to the low base from which we are starting. There are very few employees from ethnic minority groups in our main feeder bands (B1 and B2) and there is little external recruitment at present to these levels. Our turnover, especially in senior Head Office posts, is relatively low and vacancies that do arise rarely attract applicants that we seek to target. In part, this is a reflection of the fact that many of the industries from which we recruit are predominately white male.*

*We have therefore proposed a target of 1.8% for the SCS in HSE that we believe is both aspirational and achievable but also takes into account HSE's particular circumstances. Our target was determined using an analysis of factors such as: the current situation across all job bands; age profiles; likely promotion rates; the effects of increased recruitment activity in attracting ethnic minority applicants; and the impact of awareness-raising activities, particularly on the development of ethnic minority staff. To these factors we then applied an element of 'stretch' to ensure our target is genuinely challenging.*

*The targets for ethnic minority staff below the SCS have been calculated on the same basis. As these bands are the main source of talent for the SCS, it is clear that our success in achieving these targets will have a significant impact on our ability to achieve the desired levels of representation in the SCS. For this reason, a large part of our Diversity Action Programme is aimed at improving the mix of people we appoint in the main recruitment bands (B3, B4 and B6), and at their subsequent development. The arrangements we are setting in place are more likely to have a longer-term effect and we should see far greater representation at senior levels within the next 7-10 years. The table below shows our progress since the targets were set.*

Table 1: Progress against targets

<b>Band</b>	<b>1 April 1999</b>	<b>8 March 2005</b>	<b>HSE Target 2005*</b>	<b>Mod Govt Target 2005</b>
	%	%	%	%
<b>SCS</b>	0.0	<b>1.8</b>	1.8	3.2
<b>B1 (G6)</b>	0.8	<b>1.50</b>	2.3	4.1
<b>B2 (G7)</b>	1.2	<b>2.04</b>	2.1	3.7
<b>B3 (SEO)</b>	3.0	<b>4.35</b>	✓ 3.8	6.8
<b>B4 (HEO)</b>	3.1	<b>6.64</b>	✓ 4.4	7.8
<b>B5 (EO)</b>	7.6	<b>10.02</b>	✓ 9.3	16.5
<b>B6 (AA/AO)</b>	8.6	<b>7.89</b>	9.9	17.6
<b>TOTAL</b>	4.7	<b>5.65</b>	5.9	10.5

*\*Projected figures at 1.4.99*

*✓ = Targets met or exceeded*

### **Promotion targets**

*Our internal vacancy filling procedures are based solely upon merit and it would be wrong therefore to set targets. We evaluate promotions and closely monitor results so that we can establish if anything needs to be done and where (e.g. mentoring, coaching).*

### **Dealing with complaints**

*How we will deal with complaints about this Scheme or of racial prejudice by HSC or HSE*

*We have well-established formal systems for handling complaints about HSC, HSE or their staff. These apply to all complaints against the organisations, including those of racial prejudice. They are detailed in free documents including The Health and Safety Executive and you.*

*Our policy on communicating with non-English speakers identifies that we will produce core documents in key languages that explain basic rights and duties. We propose to include details of how to make a complaint in the core documents.*

*Internally there are a number of routes through which complaints may be handled. For example, we have established a Harassment Contact Adviser network which individuals can approach, entirely confidentially, about any issues of harassment or unacceptable behaviour. In the first instance, this is an avenue where complaints can be discussed without having to move on to more formal procedures. However, where there are grievances or complaints that cannot be resolved informally, we have a grievance procedure which individuals can follow. Issues can be raised by the individual concerned or through Trade Union representation.*

## **Consultation processes**

*Consulting our staff and public on the scheme and keeping them informed of progress*

*This scheme was revised following consultation in the first year (May 2002 – May 2003). Responses were generally very supportive of our initial draft and so the revisions were relatively minor. This (2005) revision will be subject to further consultation as set out below.*

### ***The public***

*We will involve representatives of our stakeholders in the process of reviewing our progress. We plan to do this by meeting key interest groups.*

*A report of progress against our action plan will be published on an annual basis and will be available on our website and will be summarised in our annual report.*

### ***Staff***

*We will continue to consult our staff on significant changes by publishing our action plans on our 'Diversity Matters' Bulletin Board and invite comments through our network of Diversity Liaison Officers, from our Trade Unions and from our ethnic minority staff network, MAGNET.*

*Articles have been, and will continue to be, published in our monthly in-house magazine 'express'. Articles will not only give an overview of the changes that are coming, but also report progress against our action plan.*

## **Methods for review**

*Progress against this plan will be reviewed on a regular basis as part of the remit of a recently established delivery group to drive and co-ordinate action on the key priorities identified under the broader vision for diversity (see Introduction). This group is chaired at Board level and contains other senior managers from across HSE. This group will report progress to both the Board and the Health and Safety Commission on an annual basis.*

*At the end of each financial year we will contribute to a Cabinet Office progress report to the Prime Minister on progress with diversity issues across the Civil Service. Our report includes progress on under-representation issues as well as racial monitoring.*

## **Duties under the Race Relations Act 1976 as amended by the Race Relations (Amendment) Act 2000 and the *Code of Practice on the Duty to Promote Race Equality***

### **1. General Duties**

*HSC/E have a general duty to promote race equality, which requires that we aim to:*

- *eliminate unlawful racial discrimination;*
- *promote equality of opportunity; and*
- *promote good relations between persons of different racial groups*

### **2. Specific Duties**

*HSC/E also have specific duties, which fall into two categories:*

#### ***i. Those covering policy and service delivery, to:***

- *assess functions and policies, or proposed policies, which are relevant in order to meet the general duties above;*
- *assess and consult on the likely impact of proposed policies on the promotion of race equality;*
- *monitor policies for any adverse impact on the promotion of race equality;*
- *publish the results of assessments, consultations and monitoring in (b) and (c);*
- *ensure public access to information and services we provide; and*
- *train staff in connection with both the general and specific duties.*

#### ***ii. Those relating to our role as an employer, to:***

- *To monitor, by racial group:*
  - *the numbers of staff in post; and*
  - *applicants for employment, training and promotion from each racial group;*
- *to monitor, by racial group, the number of staff who:*
  - *receive training;*
  - *benefit or suffer detriment as a result of performance assessment procedures;*
  - *are involved in grievance procedures;*
  - *are the subject of disciplinary procedures; or*
  - *cease employment with the body*

*Annexes F and G set out how we intend on meeting these general and specific duties.*

## **Findings from HSC/E's review of the race equality scheme 2002-2005**

### **PROGRESS MADE AND AREAS FOR IMPROVEMENT**

*Good progress was made in relation to the actions we set ourselves as an employer.*

*In relation to the actions we set ourselves as a service provider, progress declined after the first year. The area where we encountered most problems in making progress was in carrying out impact assessments. We also had difficulties in relation to monitoring.*

*The reasons for this were found to include:*

- a) insufficient attention to the potential business benefits of the scheme;*
- b) an emphasis on a large number of actions which related more to process than outcome and a lack of prioritisation of these actions;*
- c) unrealistic timescales;*
- d) a loss of focus in the context of substantial structural re-organisation over the past two years and other pressures; and*
- e) insufficient co-ordination of action across the organisation.*

### **LESSONS LEARNED**

*The review specified a need to:*

- a) avoid a purely process-driven approach;*
- b) set out an ambitious vision expressed as the outcome we want to achieve;*
- c) secure top-level commitment to the vision;*
- d) have fewer and higher impact actions which focus on the potential business benefits of the Scheme and identify key priorities aimed at driving forward the vision. These include:*
  - externally, a focus on priority and enabling programmes; in particular assessing the impact that these programmes may have on race equality;*
  - internally, prioritisation of the development and support for the network of black and minority ethnic staff as a key agent for change; recruitment promoting HSE as an organisation which welcomes and values diversity; and staff development/progression encouraged by line management and role models;*
- e) introduce more effective co-ordination and driving across HSE of the actions contained in the revised Scheme; and*
- f) include the revised Scheme as a separately identifiable, but integral, part of a more cohesive approach to diversity*

## **HSE Vision on Diversity**

*HSE's vision is "to gain recognition of health and safety as cornerstone of a civilised society". That society is a diverse one. To achieve our vision, we must protect all people's health and safety in the workplace whatever their race, gender, disability, age, religion or sexual orientation – indeed whatever their background and outlook on life. Our ability to improve health and safety outcomes depends on this – it's a business imperative for us.*

*To be successful therefore, HSE needs to be an organisation which really understands the diverse society in which it operates; which is clear about the impact of its policies and operations on that diverse society; and which confidently conducts its business with sensitivity and respect for people's different needs, vulnerabilities and perspectives on life.*

*HSE will do this best if we ourselves reflect that diverse society - if the make-up of our staff at all levels reflects the people we are dealing with. Encouraging and valuing diversity amongst our own staff is therefore key to our success and effectiveness, and one of our core values. We want to be a fair and inclusive organisation, respecting what each person brings to our business and recognising the value it adds.*

## **Promoting Diversity in HSE: key priorities for 2005-2006**

*In July 2005, the HSE Board agreed on eight priorities for particular attention in the current year:*

### **Overarching**

*1. **Raise awareness** amongst all staff of the business benefits of diversity, the Board's vision for diversity and the need for further progress in HSE*

### **External Diversity**

*2. **Build – and make better use of – the evidence base** in our policies and operations, for example on stress and ethnicity and on differential patterns of ill health among different ethnic groups;*

*3. **Design interventions** to take account of different needs of, and impact on, particular groups (such as older workers) and so help improve health and safety outcomes;*

*4. **Reach out** to people/organisations with particular understanding of diversity, to improve our policies and delivery (e.g. how best to influence ethnic minority owned/managed businesses) and to ensure our advice and information is accessible (e.g. for migrant workers);*

*We will carry out a Race Impact Assessment as part of the project to roll out Workplace Health Direct as a service with national coverage, and review the experience to inform impact assessments done in relation to subsequent proposals. This will take forward the three external diversity priorities.*

### **Internal Diversity**

*5. **Diversity of the workforce:** as part of our workforce strategy, continue to improve the diversity of our workforce and increase the representation of under-represented groups including by ensuring that recruitment reaches out more widely and by promoting HSE's image as an organisation which welcomes and values diversity;*

*6. **Career development:** continue and develop positive action to enable under-represented groups to develop the skills to progress upward more quickly;*

*7. Encourage and support the existing **networks** for women, disability and ethnic minorities and the establishment of others; and*

*8. Reward good **behaviour**, and tackle unacceptable behaviour, wherever it occurs*

## **How we will meet the general duty to promote race equality**

**2005-2008**

### **Eliminating discrimination**

*We are committed to ensuring that we have eliminated racial discrimination in our policies and in the ways they are put into practice. A fundamental principle of both HSC and HSE is our aim to target our resources towards those sectors, occupations and work activities that present the most significant risks to health and safety. We will continue to do this while ensuring that we recognise the ethnic diversity among the employers and workers we target and strive to reach out to all of them.*

*In the past we concentrated on treating all of our external stakeholders the same regardless of race. We have already recognised that this is no longer sufficient because there are differences between people, particularly in terms of the differences in vulnerabilities to health and safety risks; the networks and sources from which people gather information; the languages spoken; and the way people speak. This is as true of the way in which we treat migrant workers as we do those ethnic minority workers indigenous to the UK. We aim to ensure that we take account of these factors to help us deal fairly and equally with all of our stakeholders.*

*This does not mean there will be any special cases. If prosecution is warranted, it will be taken and if an employee's concerns about health and safety in their workplace are found to be unwarranted, they will not be pursued. But we will work to ensure that everyone, regardless of their race, can understand their rights and duties in terms of health and safety and has equal access to assistance and justice.*

### **Promoting equality of opportunity and good race relations**

*The specific duties to promote equality of opportunity provide a sound framework for HSC and HSE to make improvements in real terms. We will follow the spirit of the specific duties by taking action as outlined in the section "How we will meet the specific duties". In revising this scheme we have reviewed our analysis of all our key policies and functions to identify the areas we need to target for improvement.*

*Externally, as already mentioned (see paragraph 7(d)) this has identified the need to focus much more on assessing the impact that our developing priority and enabling programmes of work may have on race equality. For example, the diversity impact assessment we plan carrying out on an element of the FIT3 Programme (see paragraph 4) will have a strong focus on race.*

*We have already undertaken a good deal of work aimed at reaching out to ethnic minority communities. We will continue to forge links with organisations in local communities. We will also continue to use our visiting staff to deliver seminars on a range of health and safety issues to local communities. We recognise the importance of interacting with communities and to this end each of the seven operational divisions within our Field Operations Division have*

*produced plans identifying how they will engage with employers and workers from ethnic minorities on a local basis. This has been backed up by guidance and training to our visiting staff on race awareness and dealing with racist incidents. Further details of plans can be obtained from local HSE offices. We have particularly identified the need to reach out to ethnic minority and migrant workers in the construction and agriculture industries and are building on our experiences so far.*

*Internally, the inaugural meeting of HSE's Minority Ethnic Staff Network (MAGNET) was held in January 2005. The agreed objectives for this network are to actively promote the fair treatment of staff regardless of race and to promote the development and progression of minority ethnic staff so that HSE has a workforce that, at all grades, better reflects the society we live in. The network will also raise awareness of issues of ethnic diversity within HSE and how this addresses the business needs of the organisation and supports the Government's agenda on ethnic diversity. The network is open to all HSE staff from ethnic minority groups.*

*We have continued to see a significant increase in the number of staff who have benefited from level moves for development purposes. This follows the introduction of less bureaucratic procedures in our revised performance appraisal and vacancy filling systems that have been introduced. Development moves give staff the opportunity to experience different aspects of HSE's business and give the individual exposure to new skills and career choices. We continue to encourage staff to express interest in these opportunities and are now monitoring our internal vacancy filling.*

*We will check our progress through feedback from MAGNET and regular staff surveys in which individuals will be encouraged to give frank responses to a series of questions about the impact of our policies. We will take action on areas where there are strong indications that improvements are thought necessary. The next pan-HSE staff survey will take place towards the end of 2005.*

## How we will meet the specific duties to promote race equality 2005-2008

### i. Functions that are relevant to eliminating discrimination and promoting equality of opportunity and good race relations

*We have reviewed the view we took of the relevance of HSC/E's functions in eliminating discrimination and promoting equality in the first 3 year's operation of the Scheme. This has not resulted in substantial changes. However, the following takes account of the findings of this review.*

#### High relevance to race equality

##### *Policies and procedures affecting the public*

- *Publication and promotion of information regarding workplace risks etc, including via HSE Books and the Internet;*
- *Assessment of impact, and consultation with, our stakeholders on proposed new policies;*
- *Promotion of our messages through the media;*
- *Local promotional initiatives and events; and*
- *Monitoring and analysis of risk.*

##### *Policies and Procedures affecting our own staff*

- *Performance appraisal;*
- *Performance management;*
- *Staff training;*
- *External recruitment; and*
- *Internal vacancy filling and promotion*

#### Moderate relevance to race equality

##### *Policies and procedures affecting the public*

- *Investigation of reported injuries, ill health and dangerous occurrences arising as a result of work activities in sectors enforced by HSE;*
- *Managing policy and practice for incident reporting, including the Incident Contact Centre;*
- *Investigation of complaints in businesses enforced by HSE;*
- *Inspection of work activities enforced by HSE;*
- *Enforcement against bodies corporate and individuals, including prosecution and enforcement notices (excluding elements of enforcement controlled by local authorities);*
- *Advice on work-related health and safety (oral or written), including via Infoline;*

- *Investigation and enforcement relating to working time legislation;*
- *Policy development of guidance, Codes of Practice and legislation; and*
- *Research.*

*Policies and Procedures affecting our own staff*

- *Pay and conditions (excluding performance-related pay – which is covered under “Performance Appraisal”);*
- *Grievance procedures; and*
- *Disciplinary procedures.*

**Slight relevance to race equality**

*Policies and procedures affecting the public*

- *Investigation and enforcement relating to employers liability compulsory insurance;*
- *Permissioning and licensing; and*
- *Purchasing;*
- *Forensic service to HSE.*

*Policies and Procedures affecting our own staff*

- *Absence and ill health management;*
- *Pensions and retirement;*
- *Exit monitoring;*
- *Internal health and safety;*
- *Expenses;*
- *Trade Union representation (staff unions: Prospect, PCS, and FDA); and*
- *Provision and support internally of information and communication technologies and other support.*

**ii. Assessing and consulting on the likely impact of our proposed policies on the promotion of race equality**

*The results of our review showed we need to do more to assess the impact of, and consult representatives of our ethnic minority stakeholders on, our proposed policies. In particular, it showed a need to focus on our priority and enabling programmes. As indicated in the action plan, we are actively working to ensure that decisions on future policies and practice take proper account of racial equality issues. The key points are:*

- *Our chief decision-making bodies are the Commission and the HSE Board. Guidance requires that papers to these bodies specifically identify what, if any, impact the policy is likely to have upon racial equality. But there needs to be more effective ownership by those developing proposals under our priority and enabling programmes of the need for better assessment of the impact of these programmes on all groups, particularly black and minority ethnic groups. Programme owners also need to be given*

*more effective guidance and support in carrying out impact assessments;*

- All significant policy changes are subject to consultation. This is normally carried out using consultative documents. Guidance will be amended covering methods of consultation and identifying and including relevant ethnic minority consultees where appropriate.*

### **iii. Monitoring our policies for adverse impact on the promotion of race equality**

*Under the two earlier Schemes, we identified three bottom-line factors:*

- whether people from different racial groups experience different levels of risk;*
- whether people from different racial groups have equal access to information and advice about health and safety; and*
- whether experiences of operational contact, including enforcement action, differ between racial groups.*

*We have found the development of ways of monitoring these areas in a meaningful way challenging. For example, identifying levels of risk for different racial groups remains an issue for us. Collecting health and safety data by ethnicity through the development of our data collection systems has proved difficult. We commissioned two items of research: one to review the currently available data on differences in risk between different racial groups, the other to identify whether different racial groups experience different levels of occupational stress. The first pointed to areas where further research could be undertaken, but its basic conclusion was that existing information in this area was minimal. The second reported that a combination of racial discrimination, gender and ethnicity is powerfully influential in work-related stress making particular groups (such as Black Caribbean women more likely to experience work-related stress). But these have not provided as much information as we had hoped.*

*In the context of our decision to focus on fewer and higher impact actions and key diversity priorities we will therefore:*

- a) review the results of the two items of research both in terms of what we can do to counteract different experiences of risk and what we need to do to build – and make better use of - the evidence base of differences in vulnerabilities to health and safety risks that particular racial groups may experience. For example, as part of our Workplace Health and Safety Survey, we will be looking at results by ethnicity for the first time;*
- b) continue to work to identify whether the advice and information we provide is accessible to all racial groups; and*
- c) continue to consider ways of identifying whether employers from different racial groups have different experiences of operational contact.*

#### **iv. Publishing the results of consultations, assessment and monitoring**

*The Health and Safety Executive and/or Health and Safety Commission consider each major policy change. Formal papers include the significant findings of consultations and are published on our website as a matter of course.*

*Where consultations are particularly relevant to issues of race equality, we will take further steps to report back on the findings. Depending on the particular circumstances, steps may include: inclusion of a summary in the HSC annual report, a report in relevant ethnic minority media and an announcement on our website. We keep copies of all responses to consultations. All individual consultation responses can be viewed by members of the public on request, unless a consultee has specifically stated that they want their comments to remain private.*

#### **v. Ensuring public access to information and services**

##### ***Enquiries***

*Infoline provides a source of free information to members of the public on occupational health and safety issues. It is run by a contractor to HSE, who has access to Language Line, a national 24-hour interpretation service. Staff at Infoline receive training in using Language Line. We will continue to sustain this service and look for ways of making it more accessible to non-English speakers.*

##### ***Meetings in person***

*We already have systems in place to provide interpretation and translation facilities for use by operational staff. We will continue to operate these systems and seek ways to improve both their uptake and effectiveness. Particular attention will be paid to ways of advertising their availability for example through our website and staff competency in working with interpreters.*

##### ***Publications***

*HSE publishes a vast range of publications, from leaflets explaining basic rights and duties to highly technical books. We have an agreed policy for communication with non-English speakers which focuses on effective communication of targeted messages rather than mass translation of our publications. As a result, we have made available (through hardcopies and/or our website) a significant number of our free publications translated into a number of languages. These include leaflets giving core health and safety information aimed at both employers and employees – the latter translated into 23 languages to help migrant workers as well as those indigenous to this country. It also includes a number of leaflets aimed at particular industry sectors such as construction, gas safety and catering. Again, we will continue to make these available and translate other publications where a need is identified.*

##### ***Media promotion***

*Our Press Office uses a wide variety of both specialist and general media to assist the promotion of occupational health and safety messages. We recognise*

*that different racial groups tend to access different media. We continue to attach a high priority to targeting the appropriate racial groups for each message.*

*The racial mix relevant to different issues and industrial sectors will be identified to help target messages appropriately, and press officers have been provided with training and support in working with ethnic minority media organisations.*

## **vi. Training**

*Between November 2004 and May 2005, approximately 1000 HSE staff who regularly carry out external visits have been trained in the race duties placed on HSE and its staff. The lead trainers of the consultants contracted to provide this training were themselves from minority ethnic backgrounds. In total, there were 38 participative workshops and these have been extremely well received. They were designed to be directly practical and relevant. Senior management involvement ensured that the implications of the duties were seen by staff to be conspicuously considered and endorsed by managers. A supporting intranet source has been developed, and it is intended to integrate the main points of the training into inspectors' "Early Years" training. Already reports have been received of the training yielding practical results. HSE is currently supporting three minority ethnic staff on the Cabinet Office "Pathways 2" training programme and one of the seventeen members of staff on SPATS is also from a minority ethnic background. HSE is also arranging two new Windsor Fellowship placements due to start in July 2005.*

## **Arrangements to meet the specific duties of an employer**

### **Workforce data**

*Currently, our workforce data is generally analysed by gender, race, disability and job band. Our database can also provide information on age, Directorate/Division, length of service, date to current post, salary, hours of work, temporary/permanent etc.*

*We do not normally analyse our racial data by different racial group, as most groups account for less than 10 individuals and would therefore breach confidentiality. We have, however, surveyed staff to ensure that the information we hold is as accurate as possible. In this survey we collected data by different racial group and can now make the analysis on this basis, as long as it does not breach confidentiality.*

*However, not everyone has declared their racial origin to us, despite encouragement to do so. We currently have this information on around 63% of our workforce. We prefer to opt for a voluntary approach to collecting this information as we feel it would be extremely damaging to race relations within our organisation to force the issue at this point in time, but recognise that we need to improve significantly upon this figure to reach the 90%+ indicated by CRE guidance. Accordingly, all new entrants are asked to complete a questionnaire about their ethnic background. Those who do not will be approached again with a reminder. Line managers have been asked to explain to their staff how the information is used and to encourage them to provide this information. The 2005 Staff Survey will ask about race and other diversity issues and will trigger a further survey if anomalies are found with current data. We will also seek to work with the HSE trade unions to encourage their members to provide this important data.*

### **Recruitment, vacancy filling and promotion**

*We keep a very careful watch over our policies on recruitment, vacancy filling and promotion and the way in which they operate in practice and have put in place arrangements to monitor data by racial group where necessary. Through equality-proofing our procedures and monitoring results, we have identified a number of actions that we continue to take forward:*

- a) Continued monitoring of ethnicity of applicants to identify any arising issues;*
- b) Clear and short documentation, using bullet points, summaries and step-by-step guides to the selection process;*
- c) Continued contracting out of the sift process to experienced management consultants to ensure that everything possible has been done to eliminate discrimination at this stage of the process;*
- d) Amended HSE's procurement rules that require tenderers to set out their approach to race within the tender responses;*

- e) *Continued monitoring of the impact of our recruitment literature (which has been carefully designed with the needs of different racial groups in mind). We will continue to take positive action by attending job fairs etc held in regions where ethnic minority groups are encouraged to apply. We will continue to review attendance at these events and locations; and*
- f) *Where we introduce new exercises into the assessment process, we will quality assure them in advance of implementation, often by the use of external occupational psychologists, to ensure discrimination is controlled as far as is reasonably practicable.*

*HSE undertook much reduced recruitment in 2003/4 and 2004/5 compared to previous years. However, we continue to attract high quality applicants and have been successful in recruiting a good proportion of ethnic minority applicants, albeit in lower numbers in line with overall numbers recruited. This is due to a combination of factors: continued promotional activities; continued improvement of targeted advertising; contracted out sifting of application and test marking; and we will continue with this approach to attract new applicants. We also plan to undertake more awareness raising activity in target communities to pump-prime the specific recruitment marketplace.*

## **Training**

*Monitoring minority ethnic staff attending general management courses has provided less than reliable data. Directorates are asked to record this information, which they have attempted to do, but many people attending the courses choose not to declare their ethnicity. Of the information held currently, 240 delegates attended the "Essential Training for Managers" programme. Of these, only 12 declared their ethnic background (5%). This is insufficient data from which to make an analysis.*

## **Performance appraisal**

*The new system (Your Performance Matters) was introduced on 1 April 2005. High performance recommendations are assessed by a panel, normally consisting of senior managers from the particular Directorate plus one independent member. Distribution of recommendations and awards are calculated for all minority groups before and after the panel. If there is any apparent bias, the chair will investigate. Because numbers are so small, it is very difficult to make robust conclusions at the Directorate level, so the statistical analysis is also carried out for the whole of HSE. The new system means that the statistical analysis can be carried out quickly after the assessments, making it possible to take more effective action earlier should a problem be identified. The consultants who carried out the 2003/4 analysis comparing the results of the old and new (pilot) system, showed no particular differences between the two systems in the percentage of minority ethnic staff being recommended for, or awarded, high performance. The new system has removed the problem of the bias towards minority ethnic staff receiving the lower effective mark as compared to the organisation as whole as staff are considered effective unless reporting officers notify Personnel Division otherwise.*

*All managers are now required to have a diversity management objective for which they are accountable, and fairness and consistency is a foundation stone*

*of the new system. The high performance moderation panel requires more senior staff to be aware of the need for fair distribution of assessments across all minority groups, their accountability for this, and the need to take action when appropriate.*

### **Grievances**

*A Harassment Contact Adviser network has been set in place to help provide front-line informal discussion and advice. Monitoring of all formal grievance complaints and selection board decisions is undertaken by Personnel Division, and there is now provision to analyse data by ethnic group if issues become apparent.*

*Appeals against performance assessment are monitored by racial group on a sample basis. Divisions are being encouraged to identify evidence of discrimination that does not reach the stage of a formal complaint.*

### **Disciplinary action**

*We take disciplinary action where needed, including behavioural areas, and apply effective actions and remedies. All disciplinary cases, including dismissals, are monitored and detailed records are kept identifying individuals, disciplinary issue, details of the formal investigation and outcome. A system is now in place to monitor issues by racial group where they become apparent.*

*Racial, and other forms of discrimination, by HSE staff are specifically identified in our staff handbook as examples of serious or gross misconduct.*

*Further research is needed to determine Divisional handling of informal casework.*

### **Other reasons for leaving**

*The facility is in place to provide statistical data by racial group. All leaving questionnaires received from staff who resign are monitored and action taken as necessary.*

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# DISCUSSION DOCUMENT

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The full text of this and other Discussion Documents can be viewed  
and downloaded from the Health and Safety Executive web site on the internet:

**[www.hse.gov.uk/consult/](http://www.hse.gov.uk/consult/)**

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