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## **HEALTH AND SAFETY COMMISSION**

### **Revision of the Race Equality Scheme**

**A Joint Paper by Linda Buxton and Geoff Lloyd**

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#### **Issue**

1. Revision of the joint HSC/E Race Equality Scheme following the first three years of its operation.

#### **Timing**

2. Broad endorsement of a revised Scheme now is needed to ensure appropriate priorities are fed into a new, more focussed action plan.

#### **Recommendation**

3. To:

- a) Note that, on 25 May, the Board reviewed the Race Equality Scheme in the context of a wider review of its approach on diversity issues;
- b) Endorse the broad approach taken in revising the Race Equality Scheme (Annex 3) on the basis that we will:
  - consult further with internal and external stakeholders; and
  - inform the Commission of the results of this consultation once complete.

#### **Background**

4. Under an amendment made to the Race Relations Act in 2000, public bodies such as HSC and HSE were required to publish a Race Equality Scheme designed to eliminate unlawful racial discrimination and promote equality of opportunity and good relations between persons of different racial groups. Annex 1 provides further details of these requirements that include a need to review the Scheme within every three-year period running from 31 May 2002.

5. Because the work of HSC and HSE is so closely aligned, a joint Scheme was published May 2002. This was the subject of consultation later that year and a revised version was produced in September 2003 that took account of the comments received. Both versions were published and are available through the HSE website.

## Argument

6. Although our original Scheme was reviewed in 2003, this only looked at the first year of action. We have carried out a new review over the full first three years of the Scheme's operation in the context of a wider review of HSE's approach to diversity. Further details of the review and the implications for the revised Scheme are set out in Annex 2. The key conclusions that the Board endorsed as a basis for the detailed development of the Scheme were:

- a) clear **top level commitment** - expressed in the Board's Vision for Diversity (see Introduction to revised Scheme at Annex 3);
- b) **fewer and higher impact actions**. For the external dimension, this meant focussing on the policy and enabling programmes. This will be supported by central work such as commissioning the necessary evidence base and, through effective networking, sharing good practice. This should ensure delivery of the business benefits in terms of PSA impact;
- c) internally, priorities will include further effort to **improve workforce diversity** as part of our workforce strategy; and positive action to enable under-represented groups to develop the skills to progress more quickly; and
- d) more **effective driving and co-ordination of delivery** of the Scheme by a sub-group of the Board which will also steer diversity action more generally, allowing action on race to be set in its broader context.

7. The revised Scheme at Annex 3 on which we now propose to consult, focusses on planned action arising from the priorities agreed at the Board and implied by the review but emphasising the race dimension (see paragraphs 1-8 and 49 of Annex 3). It also includes a good deal of material which has been up-dated and which the Scheme needs to cover to make clear how we meet both the general and specific requirements of the Race Relations Act and to conform to CRE guidance on Race Equality Schemes.

## Consultation

8. The Scheme has been revised jointly by Policy Group and Personnel Division. The revision takes account of the Board discussion on diversity on which there was consultation with Colin Douglas (Director of Communications and Board Champion on race) and the chair of MAGNET (the network of ethnic minority staff in HSE). HSE's Trade Unions, staff networks and external stakeholders will be fully consulted on the Scheme in the Autumn to ensure the Scheme is fit for purpose.

## Presentation

9. We will be writing to stakeholders in ethnic minority business groups and other representatives of ethnic minority groups to publicise the revised Scheme and ask for their views on it. This will include an invitation to specify actions we might take to ensure that our interventions have a positive impact on such groups. There will also be internal HSE publicity as part of consultation. The eventual aim will be to publish the revised Scheme taking account of the results of consultation and further publicity will be undertaken then.

## **Costs and Benefits**

10. The costs of the Scheme are all borne by HSE (see below). The benefits include better engagement with important minority groups of workers and employers (and, through that, a more effective delivery of our business), good staff management practice and compliance with legal requirements. It supports HSC's strategy that health and safety should be a cornerstone of a civilised society and should make a contribution to social justice and inclusion.

## **Financial/Resource Implications for HSE**

11. Costs of running the Scheme are estimated at between around £180,000 - £200,000 for each of the 3 years the Scheme has operated so far. This figure is based on the cost of research commissioned under the Scheme (an average of around £100,000 per year) and staff time directly connected with reviewing, developing and monitoring the Scheme, and taking forward central work associated with it (around £90,000 per year). However, there may well be scope for making some savings in the future. Taking work on the Scheme forward in the context of action on broader diversity issues should spread costs and there should be scope to reduce the costs of research.

## **Environmental Implications**

12. None

## **Other Implications**

13. None.

## **Action**

14. The Commission is invited to endorse the broad approach of the revised Scheme and note that they will later be told of any significant changes following consultation with internal and external stakeholders.

## **Annexes**

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## Race Relations Act: Summary of Public Sector Duties

1. The Race Relations Act requires public bodies such as HSC and HSE to publish a Race Equality Scheme which has to comply with general and specific duties placed on such bodies. These duties and a requirement to review Schemes every 3 years are set out in more detail below.
2. The Race Relations (Amendment) Act 2000 (RRA) amended the Race Relations Act 1976 to place a general duty on public bodies to have due regard to the need to:
  - a) Eliminate unlawful racial discrimination; and
  - b) Promote equality of opportunity and good relations between people of different racial groups.
3. The general duty was supplemented through the Race Relations Act 1976 (Statutory Duties) Order 2001 which required public bodies such as HSC and HSE to meet a number of specific duties through a Race Equality Scheme. These were:
  - a) Assess the policies and functions the body has which are relevant in order to comply with the general duty;
  - b) Assess and consult on the likely impact of proposed policies on the promotion of race equality and publish the results;
  - c) Monitor our policies for any adverse impact on the promotion of race equality and publish the results;
  - d) Ensure equal public access to information and services we provide; and
  - e) Train staff on the need to comply with the general duty;
  - f) Monitor, by each racial group, numbers of:
    - staff in post;
    - applicants for employment, training and promotion;
    - staff who receive training;
    - staff who benefit or suffer detriment as a result of performance assessment procedures;
    - staff who are involved in grievance procedures;
    - staff who are the subject of disciplinary procedures; or
    - staff who cease employment.
4. Included in the specific duties was a further requirement that public bodies should review, in each three year period from 31 May 2002, the assessment of the policies and functions the body has which are relevant in order to comply with the general duty (see paragraph 3(a) above).

## Review of Race Equality Scheme

1. The Scheme was reviewed this Spring in the context of a wider review of HSE's approach to diversity.

### *Wider Review of Diversity*

2. It was agreed at the HSE Board on 25 May that, although considerable progress has already been made, more needed to be done. In particular, there needed to be a clearer vision of what HSE would look like if it was among the leading practitioners of "diversity aware" policies and practices. Further action needed to be more focussed, sustained, co-ordinated and with greater top-level commitment. The Vision and key priorities (which are still subject to minor drafting amendments) have been incorporated into the introduction to the revised Race Equality Scheme. In addition, it has been decided to set up a Board sub-group with a remit to co-ordinate and drive action to turn the Vision into reality.

### *Review of Race Equality Scheme*

3. The original Race Equality Scheme for HSC/E covered the three-year period to the end of May 2005. The Scheme was revised in 2003 (reprinted 2004) to take account of responses during consultation on the original scheme. The action plan contained in the Scheme specified 45 separate actions under two headings for each of the three years.

4. In the context of the wider diversity review, the review of the Scheme pointed to the need for a different approach focussing on the potential business benefits of the Scheme, fewer but higher impact actions and more effective co-ordination. Further detail of the lessons learnt from this review are summarised below.

5. Good progress was made in the first year, but the rate of progress declined considerably during the subsequent years. The reasons for this include:

- insufficient attention to the potential business benefits of the Scheme;
- an emphasis on a large number of actions which relate more to process than outcome and are not prioritised. For example, production of guidance on impact assessment rather than doing the assessments;
- unrealistic workplan. For example, research on health and safety vulnerability of particular racial groups and the translation of health and safety guidance took longer than envisaged to finalise;
- a loss of focus on the Scheme in the context of (a) substantial structural re-organisation of HSE over the past two years and (b) other pressures such as Morecambe Bay;
- insufficient co-ordination of action across the organisation – another finding of the benchmarking study.

### **Implications for updated Scheme**

6. We need to:

- avoid a purely process-driven approach. It hasn't worked in the past and it won't in the future;
- set out an ambitious Vision, expressed as the outcome we want to achieve;
- secure top level commitment to this;
- agree fewer and higher impact actions – and identify key priorities aimed at driving forward the Vision;
- focus on the potential business benefits of the Scheme; and
- introduce effective co-ordination and driving across HSE of the actions contained in the revised Scheme.

7. The revised Scheme at Annex 3 therefore:

- a) sets the Scheme in the context of HSE's Vision on diversity and the key priorities;
- b) up-dates the Scheme in the light of its first three years of operation. In particular, it is explicit about, and takes account of, the lessons learnt in this period; and
- c) incorporates an action plan which reflects the key priorities for diversity and which provides greater focus on fewer and higher impact actions. Without detracting from this focus, the plan also aims to sustain and develop the work we carried out in the first three years.

**Race Equality Scheme for the  
Health and Safety Commission  
and  
Health and Safety Executive**

2005-2008

Revised edition – July 2005

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## Introduction to 2005 revised edition

1. This is the third edition of the Race Equality Scheme published jointly by the Health and Safety Commission (HSC) and the Health and Safety Executive (HSE). HSC and HSE each have a duty to publish a Scheme. But, because our work is so closely aligned, we have decided (as with earlier editions) to issue a single Scheme that commits both organisations to working in partnership to meet both the spirit and letter of its duties as a public body under the Race Relations Act 1976 – to:

- a) Eliminate unlawful racial discrimination; and
- b) Promote equality of opportunity and good relations between persons of different racial groups.

2. This edition of our Race Equality Scheme has been revised to take account of the lessons learnt in the first three years of its operation from 2002. These are summarised below (see paragraphs 5-8). It has also been revised to take account of the results of a broader review of how HSE can improve the way in which it operates in an increasingly diverse society. This review found that while HSE had made significant progress, it could do much better. In particular, there was a need for:

- a) A clearer vision of what HSE would look like if it was among the leading practitioners of “diversity aware” policies and practices;
- b) That this vision needed to be articulated and promoted by HSE’s Board; and
- c) Action needed to realise the vision needs to be better:
  - focussed on the business benefits of diversity and concentrate on a limited number of key priorities to achieve maximum impact;
  - co-ordinated both across the various strands of diversity and across HSE’s dual role as employer and service provider.

### Vision for Diversity

3. This revision of our Race Equality Scheme therefore needs to be seen in the context of the HSE’s wider vision on diversity. This says:

*“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.”*

4. For the year 2005/06, we have set 8 key priorities for realising this vision:

**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 (eg how best to influence ethnic minority owned/managed businesses) and to ensure our advice and information is accessible (eg for migrant workers);

An early deliverable will be an impact assessment of an element of the FIT3 Programme (Fit for work, Fit for life, Fit for tomorrow) which takes forward these three 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;
- 8) Reward good **behaviour**, and tackle unacceptable behaviour, wherever it occurs.

**Review of operation of Race Equality Scheme 2002/05**

5. A short internal review was carried out to learn the lessons of operating the first three years of the Scheme: both the original Scheme published in May 2002 and the second edition - revised in September 2003 to take account of responses received when consulting on the original Scheme and the progress made in the first year of the Scheme.

6. Good progress was made in relation to the actions we set ourselves as an employer. However, in relation to the actions we set as a service provider, progress declined after the first year. The area where we encountered most problems in making progress were in carrying out impact assessments although 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.

7. The lessons learnt as a result of this review can be summarised as follows. The 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 are set out in our action plan for 2003-8 (see pages [22-23]) but 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; and
- e) introduce more effective co-ordination and driving across HSE of the actions contained in the revised Scheme;
- f) include the revised Scheme as a separately identifiable, but integral, part of a more cohesive approach to diversity.

8. The following therefore revises and up-dates the Scheme in the light of these findings. In particular, the relevance of our functions to eliminating race discrimination and promoting race equality has been slightly revised and the action plan now provides greater focus on fewer and higher impact actions. However, without detracting from this focus, we will also sustain and develop some important work carried out in the first 3 years such as equality proofing our personnel procedures and our policy on communications with non-English speakers.

## **Race equality values, principles and standards**

9. HSC and HSE are committed to the need to eliminate racial discrimination and promote racial equality. This is consistent with our wider vision of HSC/E becoming a diversity-aware organisation (see paragraphs 3-4 above). We understand that, as part of this vision, we have an important role to play in this by:

- a) seeing that our mission to protect people's health and safety by ensuring risks in the changing workplace are properly controlled takes full account of the needs, sensitivities and particular vulnerabilities to risks, that racial groups may have; and
- b) working to ensure that the make-up of our staff at all levels reflects the racial diversity of those people we seek to protect.

We believe we can respond better to the racial diversity of our external stakeholders if our workforce reflects that diversity; we are more likely to be able to recruit and retain staff across these groups if we become known as an organisation that is sensitive to their particular needs.

10. We are proud of the professionalism of our staff and the foundations that we have already put in place to eliminate racial discrimination and promote equality. However, from our review of the first three years of the Scheme, it is clear that we need to do more to ensure that we work in a way that is fair and accessible for all. We are committed to meeting both the spirit and letter of the Race Relations Act and this revised Scheme aims to do this by setting out a programme that builds on the progress made so far.

## Our race equality strategic aims

11. We are therefore committed to working towards:

- a) **Ensuring that our policies and practices do not impact adversely** on one or more racial groups;
- b) **identifying and closing any gaps in service provision**, so that people have equal levels of protection, equal access to information etc. Wherever we do find gaps in these areas we want to raise the standard for all to the level of the best;
- c) **outside stakeholders** who, regardless of their race, have **similar levels of confidence in HSE** and awareness of the part we play in occupational health and safety;
- d) **a workforce that is representative of the people we serve**, with representation of those from ethnic minorities throughout the organisation, not just in junior grades; and
- e) **staff** who, regardless of their race, are **equally satisfied with their work** at HSC/E.

## How we will meet the general duty

### Eliminating discrimination

12. 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.

13. 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.

14. 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**

15. 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.

16. 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.

17. 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.

18. 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.

19. 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.

20. 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**

### **Our functions which are relevant to eliminating discrimination and promoting equality of opportunity and good race relations**

21. The view we took of the relevance of HSC/E's functions to eliminating discrimination and promoting equality in the first 3 year's operation of the Scheme has been reviewed. 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;
- 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;
- Research.

*Policies and Procedures affecting our own staff*

- Pay and conditions (excluding performance-related pay – which is covered under “Performance Appraisal”).
- Grievance procedures.
- 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;
- 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);
- Provision and support internally of information and communication technologies and other support;

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

22. 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:

- a) 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;
- b) 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.

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

23. 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.

24. 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 by ethnicity through the development of our health and safety 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 and gender and ethnicity is powerfully influential in work stress making particular groups (such as Black Caribbean women more likely to experience work stress. But these have not provided as much information as we had hoped.

25. In the context of our decision to focus on fewer and higher impact actions and key diversity priorities (see paragraph 4), 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;

- c) Continue to consider ways of identifying whether employers from different racial groups have different experiences of operational contact.

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

26. Each major policy change is considered by the Health and Safety Executive and/or Health and Safety Commission. Formal papers include the significant findings of consultations and are published on our website as a matter of course.

27. 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.

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

#### ***Enquiries***

28. 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***

29. 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***

30. 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**

31. 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.

32. 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.

## **Training**

33. 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.

34. Those co-ordinating our approach to racial equality work keep their professional knowledge current through specialist workshops/seminars (eg through the CRE) and other consultancy training on specific equality issues. All central contracts for training now require diversity to be addressed and training evaluation forms include assessment of compliance with diversity policies.

## **Arrangements to meet specific employment duties**

### **Workforce data**

35. 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.

36. 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.

37. 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**

38. 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.
- 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.

39. 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**

40. 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 course 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**

41. 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.

42. All managers are now required to have a 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**

43. 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.

44. 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**

45. 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.

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

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

### **Other reasons for leaving**

48. 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.

## Action plan

49. As we have already said, one of the lessons learnt from the review of the first three years operation of the Scheme was the need to have fewer but higher impact actions which focus on the potential business benefits of the Scheme (see the Introduction). The Action Plan (see below) for the next 3 years of the Scheme therefore focuses on the actions identified as key priorities.

### Race Equality Scheme - Action Plan for 2005-2008

The following sets out the key priorities and other actions HSC/E has set itself for the period May 2005-2008 in relation to race. They support our overall key priorities on diversity and refer to those priorities as set out in the Introduction (see paragraph 4). Targets and milestones for these priorities will be agreed by the Board's Diversity sub-group following their meeting in September 2005.

#### Key priorities

##### *Overarching:*

1) Key priority 1: **We will raise awareness amongst our staff of the business benefits of diversity.** More specifically, we will:

- Publicise the Board's vision for diversity and place it on our intranet;
- Publish examples of good practice in our in-house magazine;
- Sustain and develop the training already carried out on diversity awareness including race awareness;

##### *External diversity:*

2) Key priority 2: **We will build – and make better use of - the evidence base in our policies and operations.** More specifically, we will:

- review the results of research already carried out to:
  - o Counteract different experiences of risk where the results show scope for action; and
  - o Assess what further needs to be done to build and make better use of the evidence base

3) Key priority 3: We will **Design interventions to take account of the different needs of, and impact on, particular ethnic minority groups.** More specifically, we will:

- 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;

- An early deliverable will be to carry out a diversity impact assessment of an element of the FIT3 (Fit for work, Fit for life, Fit for tomorrow) Programme 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;
  - More effective support from the central diversity teams in Personnel Division and Cross-cutting Policy Division;
- 4) Key priority 4: **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.** More specifically, we will:
- Review access to the information and services that HSE provides for both indigenous ethnic minority groups and migrant workers which will focus on:
    - o Access to advice and guidance through the HSE website and Infoline supported by customer satisfaction surveys which take account of the views of ethnic minority users; and
    - o The need to build on the information we provide in languages other than English.

#### *Internal Diversity*

- 5) Key priority 5: **As part of our workforce strategy continue to improve the diversity of our workforce.** More specifically, we will:
- 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.
- 6) Key priority 6: **We will continue and develop positive action to enable under-represented ethnic minority groups to develop the skills to progress upward more quickly.** More specifically, we will:
- Focus on the development of minority ethnic staff through:
    - o Encouragement by line management to reduce potential feelings of isolation; and
    - o Providing examples of more attractive role models.
- 7) Key priority 7: **We will encourage and support staff networks** and in particular:
- Develop the minority ethnic network as a key agent for change.

8) Key priority 8: We will reward good **behaviour**, and tackle unacceptable behaviour, to promote good race relations between staff.

#### *Delivery*

9) We will improve co-ordination and delivery of the above actions by:

- Demonstrating greater top level commitment through the Board's overall vision on diversity and individual members personal diversity objectives;
- Establishment of a Diversity Group chaired by a member of the HSE Board and made up of other members of the Senior Civil Service in HSE with a remit to ensure all deliverables and targets are met;

## **How we will review our action plan**

50. 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.

51. 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.

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

### **External targets**

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

53. 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**

54. 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. Their benchmark for ethnic minority representation in the SCS by 2005 is 3.2%.

55. 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 staff 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.

56. We have therefore proposed a target of 1.8% for the SCS in HSE that we believe is both stretching 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.

57. 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 in the four years since the targets were set.

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

58. 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 (eg mentoring, coaching).

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

59. 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*.

60. 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.

61. 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.

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

62. 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**

63. We will involve representatives of our stakeholders in the process of reviewing our progress. We plan to do this by holding forums for the key interest groups.

64. 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**

65. 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.

66. 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.