

Health and Safety Executive Board Paper		HSE/05/009	
Meeting Date:	25 May 2005	FOI Status:	Fully Open
Type of Paper:	Above the line	Paper File Ref:	220/SASD/1061/2001
Exemptions:	No		

HEALTH AND SAFETY EXECUTIVE

The HSE Board

The Future of Diversity in HSE

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Cleared by: Giles Denham and Vivienne Dews on 17 May 2005

Issue

1. Articulating a Vision, and securing a visible commitment from HSE's top leadership that will drive further change within the organisation in support of agreed priorities.

Timing

2. Urgent – to allow HSE to review and update its Race Equality Scheme in the light of that Vision.

Recommendation

3. That:
 - the Board agrees and communicates its Vision for HSE in relation to diversity (draft at Annex 2), and its agreed priorities for 2005-06;
 - Board members set, and make public, personal diversity objectives designed to give effect to that Vision and take forward those priorities; and
 - the Board endorses the broad approach to revising the Race Equality Scheme (a statutory obligation) at paragraphs 9-10 below.

Background

4. Analysis of activity since HSE started diversity action in 1999 reveals patchy performance. We have various plans in place – notably our Diversity Action Plan and our Race Equality Scheme. We have active champions at Board level. We have some promising initiatives and good examples in relation to HSE as an employer (internal diversity) and in relation to HSE's policies, programmes and operations (external diversity). **Annex 1** provides a snapshot of **progress to date**. In general, this shows

better progress internally than externally. A benchmarking study (by Momenta) comparing HSE's overall performance (on the equality scheme) with other public sector bodies suggests 'ok but could do better'.

How can we do better?

5. Externally, the focus so far has been on process, mainly with the aim of achieving compliance with HSC/E's legal duties under anti-discrimination legislation. We have limited information about the impact of our activities on different groups. And this is not routinely considered as we develop policies or change practices. Internally, the policies are essentially in place now: indeed, HSE won a Gold Standard award in a Whitehall wide diversity audit by "Opportunity Now". In the last staff survey 70% of respondents agreed that HSE is an equal opportunities employer. However, there is no room for complacency. Although we are now attracting more members of ethnic minorities into HSE they, women and disabled staff remain disproportionately concentrated at more junior levels and no member of the ethnic minorities has ever been promoted into the SCS.
6. We need a fresh impetus. Momenta noted the importance of **top level commitment** and suggested we would do better by focusing on the **business benefits** of diversity and improving **cross-HSE coordination of action**. We also need to avoid spreading energies too thinly, and direct effort to a **limited number of key priorities** to achieve maximum impact.
7. On **top level commitment** we propose that the Board articulate and promote a **Vision**: what HSE would look like if it were great. The Vision should pull together internal and external dimensions of diversity: they are mutually reinforcing. The draft Vision in **Annex 2** builds on the individual visions you have shared with us in one to one discussions. A Board vision will not in itself bring about a change. To make a real difference we will need Board leadership to raise awareness and change attitudes and behaviours throughout the organisation, but particularly on the part of managers. The Board may wish to discuss how best to achieve this.
8. The **key priorities** may be:
 - Improving our understanding of how our interventions impact on different groups so that we can identify the areas which we most need to tackle.
 - Building the business case for reaching out to diverse groups as part of delivery of our objectives and targets.
 - Making better use of recent research, for example on stress and ethnicity, and on differential patterns of ill health among different ethnic groups.
 - As part of the workforce strategy continuing to improve the diversity of our workforce, including by promoting HSE's image as an equal opportunities employer and trying innovative approaches to recruitment and retention.
 - Continuing and developing the positive action to encourage under-represented groups to progress upward more quickly.

- Continuing the networks for women and ethnic minorities
- Continuing to tackle unacceptable behaviour wherever it occurs.

And what specifically do we need to do on race?

9. We need urgently to complete a review and updating of the HSC/E Race Equality Scheme – on which Momenta has reported over the last year. We have started this process with an internal “lessons learned” paper (Annex 3) along with a more detailed progress update (Annex 4), which benefits from feedback from MAGNET and is endorsed by the Board Race Champion, Colin Douglas.
10. In the light of this we propose, subject to Board views and discussion, that the following broad approach should guide detailed development of the updated Scheme:
 - a) clear **top level commitment** – as expressed in the Board Vision and Board members’ personal objectives
 - b) **fewer and higher impact actions**. For the external dimension, we need to **focus on the policy and enabling programmes** (where work remains to be done on assessing and acting on race equality impact – the heart of the CRE’s push in this area), giving clear accountability to Directors for making progress through their own diversity objectives. We will ensure that the central support team prioritises help to them including 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, a similar **prioritisation** of further action on racial diversity within the workforce in the light of Board decisions on the Workforce and Pay Strategy Implementation Plan and the material in the annexes to this paper. We propose
 - Development and support of **MAGNET** as a key change agent
 - Recruitment promoting HSE as an employer of choice
 - Staff development/progression encouraged by line management and role models
 - d) **More effective driving and co-ordination** of delivery of the scheme by a body chaired at Board level and bring together all parts of HSE with responsibility for key areas (staff, communications and programmes). This body could also steer diversity action more generally, allowing action on race to be set in its broader context.

Ensuring delivery

11. In relation both to the Vision and the Race Equality Scheme, it will be important to harness the Board’s commitment through well-targeted diversity objectives for all SCS Directors. We propose as a next step that Board members should consider revising their own diversity objectives in the light of this discussion; and consider how other Directors’ objectives might be focussed to secure delivery of the key priorities.

Consultation

12. With Personnel Division, Colin Douglas and the MAGNET chair, Sharan Baines. Following discussion at the Board, it is proposed that others (such as the Trade Unions, staff networks and, where appropriate, external stakeholders) will be consulted on the Vision, the key priorities and the revision of the Race Equality Scheme.

Financial/Resource Implications for HSE

13. It is envisaged that the work needed could be taken forward within existing resources – within programme teams as well as Personnel and Cross-cutting Interventions Division – though it will demand internal reprioritisation.

Action

- 14.
- Policy Programmes and Personnel jointly to take forward action agreed on the Vision, priorities and Race Equality Scheme;
 - Board members to consider revising their diversity objectives to ensure they support the priorities; and circulate them to Board colleagues by end June, with the aim of wider circulation alongside the vision.

Annexes

1	Current state of play and progress to date <ul style="list-style-type: none">• Internal / employer role (including HSE's progress towards <i>Modernising Government</i> targets)• External / service provider role	<i>page</i> 5
2	Draft Board Vision of Diversity	9
3	Race Equality Scheme: lessons learned from the current scheme and a draft Scheme for 2005/06	10
4	Race Equality Scheme: progress against HSC/E's Action Plan 2002-2005	11

Current State of Play and Progress to Date

1. Internal / employer role: progress and achievements

- a) Staff Survey, carried out every two years and includes questions on fair and equal treatment covering gender, race/ethnicity, disability, religion and belief and sexual orientation, working patterns and unacceptable behaviour. 2004 survey showed 70% of staff thought that HSE is an equal opportunity employer – a proportion that compares well with the benchmark for civil service departments.
- b) Award for excellence in recruitment advertising from Birmingham Evening Standard; advert based on “University of Life” approach.
- c) Gold Level Diversity Award from “Opportunity Now” in their annual benchmarking exercise. In particular, HSE was singled out for three areas of best practice:
 - o unacceptable/undesirable behaviour, communicated to all staff through training workshops, induction and team meetings;
 - o Diversity Action Plan, challenging each Directorate/Division to take action on diversity; and
 - o seminars for women staff: “Women in HSE – Removing the barriers”.
- d) Establishment of staff networks – Diversity Liaison Officers (DLOs), Harrassment Support Network and networks of black and minority ethnic staff and disabled staff. ACAS has provided these networks with awareness training on the new legislation on religion and belief and sexual oriebtation.
- e) Diversity Action Plan geared to embedding diversity into our role as employer. Plan reviewed annually by D/Ds and DLOs.
- f) 74% attendance of HSE staff at “Personal Challenge” workshops aimed at raising awareness of prejudices and behaviour. This resulted in (a) a cascaded paper to all senior HSE staff to include items on team meeting agendas; and (b) encouraging staff to have more confidence in tackling unacceptable behaviour.
- g) Series of women’s seminars for those in SCS feeder grades following results from a survey on why women did not apply for such grades in HSE.
- h) Sponsorship of Windsor Fellows each year and operation of Pathways and Disability Bursary schemes aimed at helping existing black and minority ethnic and disabled staff into jobs at Band 2.
- i) Numerous articles in “Express” on eg Harrassment Support Network, promoting changes in Personnel Policies (which have diversity implications) and requirements of new equality legislation.
- j) Progress in meeting targets for proportion on women, disabled and black and minority ethnic staff – see following tables.

HSE'S progress towards 'Modernising Government' targets 1999-2005

Disability

<i>Band</i>	<i>1 April 1999</i>	<i>8 March 2005</i>	<i>HSE target 2005*</i>	<i>Mod Gvt target 2005</i>
	%	%	%	%
SCS	0%	1.92%	3.7%	3.0%
B1 (G6)	1.6%	1.50%	3.1%	4.2%
B2 (G7)	1.2%	4.40%	1.8%	2.4%
B3 (SEO)	1.3%	3.21%	1.6%	2.2%
B4 (HEO)	2%	3.98%	2.9%	3.9%
B5 (EO)	2.7%	4.39%	3.9%	5.2%
B6 (AA/AO)	6.1%	6.47%	6.4%	8.7%

Gender

<i>Band</i>	<i>1 April 1999</i>	<i>8 March 2005</i>	<i>HSE target 2005*</i>	<i>Mod Govt target 2005</i>
	%	%	%	%
SCS	24.5%	23.08%	29.0%	35.0%
B1 (G6)	6.2%	19.55%	10.0%	12.1%
B2 (G7)	12.2%	18.40%	13.7%	16.5%
B3 (SEO)	26%	34.24%	27.8%	33.6%
B4 (HEO)	47.1%	49.34%	50.0%	60.3%
B5 (EO)	65.7%	69.07%	64.0%	77.2%
B6 (AA/AO)	72.9%	71.49%	70.0%	84.5%

Race

<i>Band</i>	<i>1 April 1999</i>	<i>8 March 2005</i>	<i>HSE target 2005*</i>	<i>Mod Govt target 2005</i>
	%	%	%	%
SCS	0%	1.8%	1.8%	3.2%
B1 (G6)	0.8%	1.50%	2.3%	4.1%
B2 (G7)	1.2%	2.04%	2.1%	3.7%
B3 (SEO)	3%	4.35%	3.8%	6.8%
B4 (HEO)	3.1%	6.64%	4.4%	7.8%
B5 (EO)	7.6%	10.02%	9.3%	16.5%
B6 (AA/AO)	8.6%	7.89%	9.9%	17.6%

*Projected % set at 1 April 1999

NOTE: It is important to recognise that not all new recruits or existing staff wish to divulge their ethnic background or disability status and therefore the statistical reports may not be a complete picture of HSE's rich mix of individuals. We acknowledge the fundamental right of all our staff to choose whether they take part in our statistical analyses.

2. External / service provider role: progress and achievements

- a) Completion of study benchmarking HSE's progress on diversity with those of other public bodies plus a desk review of the Race Equality Scheme.
- b) Establishment of Race Equality Contacts Network throughout D/Ds in HSE to take forward individual D/Ds Race Action Plans.
- c) Guidance (OCs 167/12 and 167/13) and programme of training for all visiting staff (such as inspectors) on race awareness and on dealing with racist incidents while making visits.
- d) Contributions to the public debate on disability discrimination requirements and, in particular, its interface with health and safety provisions. This has included a supportive response to DWP and DRC consultation on the proposed public sector duty to promote equality for the disabled and a Memorandum to the Transport Select Committee's inquiry into disabled people's access to transport.
- e) New guidance for new and expectant mothers giving advice in relation to particular vulnerabilities to risks to health and safety eg manual handling, radiation, infectious diseases, chemical agents and working conditions such as stress.
- f) Establishment of a programme of work that is geared to building our evidence base about the needs and vulnerabilities to health and safety risks specific to migrant and illegal workers and which has overlaps with work on diversity.
- g) The Agriculture/Food Sector has developed a three-year programme of work with the aim of reducing the level of risk and resultant injury and ill-health experienced by temporary labour in the agriculture and food industries.
- h) The Construction Division is focussing on those who exploit vulnerable groups rather than on the vulnerable workers themselves.
- i) Local initiatives taken forward by race equality contacts within HSE such as a survey of health and safety activity of employment businesses in London undertaken in conjunction with the local Race Equality Council, an event for Polish construction workers held in London and publicity for health and safety messages with Scottish Muslim organisations, press and radio coverage during Ramadan.
- j) A number of initiatives to improve access to health and safety advice including:
 - Bi-lingual guidance for employers with translations into 7 core languages (eg Chinese, Bengali);
 - Provision of Infoline's telephone interpreting service;
 - Web-based leaflet giving guidance on rights and responsibilities of workers translated into 22 languages (including Welsh); and
 - Translation of other sector specific guidance (eg gas safety).

- k) Completion of a review of existing sources of information on the health and safety of ethnic minorities (Warwick University). The main findings of this were:
- workplace injury rates are lower for South Asians. Bangladeshi and Chinese workers report the lowest workplace injury rates; Black Caribbeans report rates similar to the white population. However, uncertainty as to whether this shows that these groups work in lower risk occupations, or is a reflection of under-reporting of injuries by ethnic minority respondents;
 - UK South Asians (in particular Bangladeshis and Pakistanis) in age range 16-64 exhibit highest levels of limiting long-term illness (LLI) and self-reported poor health (SPH). Black Caribbeans have next higher levels of LLI and SPH. Black Africans and Chinese report lower levels than White population. Levels of LLI particularly high for South Asians aged 50-64. Currently unclear why these differential patterns exist, but may indicate discrimination.
- l) Completion of research into stress and ethnicity (Cardiff University). The main finding was that:
- The combination of racial discrimination with gender and ethnicity is powerfully influential in work stress. This makes particular groups (such as Black Caribbean women who have experienced racial discrimination) more likely to experience work stress.
- m) Completion of HSL research commissioned jointly by Policy Team and DWP: *Facts and misconceptions about age, health status and employability* (publication May 2005).

[Draft:] HSE Board's Vision for Diversity

Vision

HSE's vision is to gain recognition of health and safety as a cornerstone of a civilised society. That society is a diverse one. We therefore want to 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.

So we want HSE to be an organisation which really understands the diverse society in which it operates, and which confidently conducts its business, with sensitivity to people's diverse needs and perspectives on life. HSE will do this best if we ourselves reflect that diverse society, and so we want the make-up of our staff at all levels to reflect the people we are trying to protect. We value your diversity. It's key to our success and effectiveness.

Making this a reality

As a Board, we are committed to turning this vision into reality, building on our progress so far. We are committed individually - our personal perspectives are given in the Annex - and corporately.

We have identified our key priorities for 2005-06, including the review and updating of HSE's Race Equality Scheme (now issued for consultation). But we need to ensure that all this action is driven forward consistently and with determination. So we will:

- Set personal diversity objectives supporting the key priorities
- Publish these on the intranet, and report to you in April 2006 on how well we've achieved them
- Ensure that all members of the SCS set diversity objectives supporting the key priorities
- Establish a Board-chaired group to steer and drive progress on our key priorities. Again, we'll report to you in April 2006

[Board signatures – all members to sign]

Race Equality Scheme: Lessons learnt from current Scheme

1. 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: A note of the progress made against each action point is at Annex 4.
2. 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. The Momenta report benchmarking HSE against other public sector bodies recommends much greater focus on business benefits of diversity.
 - 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 Momenta's.

Implications for updated Scheme

3. 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 (a recommendation of Momenta's).
 - 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.
 - introduce **effective co-ordination and driving across HSE** of the actions contained in the revised Scheme. Momenta recommends that a single co-ordinating body is set up with responsibility for ensuring all deliverables are produced and targets met. We propose a Board level Chair of such a co-ordinating body (Vivienne Dews/ Colin Douglas?)

Progress against HSC/E's action plan up to 31 May 2005

PROGRESS AGAINST YEAR 1 ACTIONS PROJECTED FOR COMPLETION BY 31 MAY 2003

Policies and Procedures Affecting the Public

Action point	Action	Progress report
1	Actively consult on the contents of this Race Equality Scheme with ethnic minority and other stakeholders, including the Trades Unions representing our staff, and issue a revised Scheme taking account of the feedback	Completed. Consultation on a revised Scheme completed and a revised scheme approved by HSC in 2003 (HSC/03/90). This now available on HSE website and sent to those who were involved in consultation.
2	Implement guidance requiring all Commission and Board papers containing proposals for new policies to specifically address the likely effects of the policies on promoting racial equality.	Completed.
3	Produce and distribute formal guidance to staff on three key issues: a) using interpreters and translators; b) taking enforcement action where differences in language significantly contribute to the risk; and c) recording and reporting evidence of racial harassment that operational staff encounter during their routine work.	Completed. a) Guidance on using interpreters and translators issued July 2003. b) Guidance on enforcement action (OC/167/12) issued September 2003 c) Guidance on recording and reporting evidence of race harassment to be issued December 2004 (OC/??/??)
4	Field Operations Directorate will use available information to determine the racial mix of the people it serves on a local/regional basis and will then devise a brief plan for engaging with stakeholders from different racial groups.	Completed.
5	Publish and promote core information on occupational health and safety in key languages other than English and Welsh for both workers and employers.	Completed. Infoline have a translation service in place. "Introduction to Health and Safety" aimed at employers translated into Bengali, Cantonese, Gujerati, Hindi, Punjabi, Turkish and Urdu. Workers' guidance detailing basic rights and duties for workers made available in 22 languages on HSE website December 2004.
6	Carry out training for all press officers to assist them in working effectively with the ethnic minority media.	Completed
7	Complete a research project into methods for determining key occupational health and safety risks for different racial groups.	Completed March 2004. Now considering findings.

Action point	Action	Progress report
8	Each Sector (those responsible for operational policy relating to specific industrial sectors) will produce a brief plan that indicates the racial mix in their industrial sector, the likely implications for policy and the actions required to ensure that proper regard is given to racial equality.	Completed.
9	Determine the racial mix of workers in the rail industry and identify key implications for HSC/E policy and practice in this sector.	Ongoing. Railway Policy actively working on gathering data from operating companies in association with Strategic Rail Authority. Data from research project (Action point 7) to be considered in addition.
10	Complete research into attitudes to, and awareness of, occupational health and safety among employers from ethnic minority groups.	Completed. Research completed and final report published in September 2003.
11	Review how policy on the employers' duty to communicate information to their employees in a comprehensible form (Management Regulation 10) is promoted and enforced in practice.	Completed. Guidance issued to the field (OC 167/12). Guidance to field staff issued under action point 3 also takes this action forward.
12	Review policy relating to personal protective equipment (hard hats, breathing apparatus, gloves etc) to identify if particular racial groups are disadvantaged in a way that is unjustifiable.	Completed through HSE involvement with DTI's consultation on the (then) draft Employment Equality (Religion and Belief) Regulations 2003.
13	Develop and implement a model for assessing the relevance of racial equality to complex issues of health policy.	Ongoing. Criteria developed, but difficulty in accessing data to measure against. To revisit with forthcoming data and test approach with a specific issue. To review in light of findings from risk and ethnicity research (action point 7)

Policies and Procedures Affecting our Staff

Action point	Action	Progress report
14	Carry out an annual review of the relationship between ethnicity and performance appraisal markings.	Review completed and monitoring ongoing. The box mark analysis in 2002/3 showed a similar trend to that of analyses carried out since the system was introduced in 1995 The highest markings (Box A) awarded to staff from ethnic minority groups was low and they are also significantly more likely to be awarded a Box C marking (lowest satisfactory mark). Will require careful monitoring. The box mark analysis for 2003/04 will be carried out when the appraisals come through.
15	Monitoring of pay through an expanded equal pay audit.	Review completed and monitoring ongoing.
16	Evaluate and eliminate potential discrimination in the development of a new staff performance management system.	Ongoing. Equality-proofing undertaken (including to address problems on markings (action 14)) and further piloting of new system on-going in

		2003/04. Roll-out of the new system likely from April 2004 with on-going in-house monitoring. Initial findings showed the system to be more open and able to deal with discrimination at an early stage. No statistical discrimination identified in the pilots. Moderation takes place in summer 2004 and an analysis can take place after that.
17	Deliver targeted diversity training as identified to be necessary by the evaluation of the 'Personal Challenge' workshops.	Ongoing. Directorates and Divisions and activity ongoing. The 'Personal Challenge' workshops will be repeated annually for all new recruits to HSE where feasible (groups of less than 75-100 are not cost effective).
18	Introduce ethnic monitoring of staff training activities.	Completed and monitoring ongoing. System in place and regular monitoring on training inputs can now be undertaken. Management training is compulsory for all new managers. Initial evaluation of training activity has not shown any particular issues, but it is still too early to judge trends.
19	Review key aspects of our recruitment policy, including recruitment literature, promotional activities, and the use of assessment centres for recruitment purposes.	Partially complete and work ongoing. Reduced recruitment this year, but success in recruiting ethnic minority applicants (13%) in most recent Trainee Inspector campaign due to range of actions. Further progress in 2003/04 with 23% of recruits for Policy Adviser posts from ethnic minority background and attracted our first ethnic minority appointee at Board level. Review of Band 4 Policy recruitment matrix and assessment process put on hold during Change Programme – to be revisited in 2004/05.
20	Introduce ethnic monitoring of applicants for internal vacancy filling and promotion including application, sift and interviewing.	Completed system and monitoring ongoing. System in place from April 2003 with quarterly monitoring. We have decided not to analyse on an individual board basis and to combine all data to avoid distortion and individuals being identified.
21	Monitor arrangements for the provision of agency staff to HSC/E.	Completed arrangements and monitoring ongoing.

PROGRESS AGAINST YEAR 2 ACTIONS PROJECTED FOR COMPLETION BY 31 MAY 2004

Policies and Procedures Affecting the Public

Action point	Action	Progress report
22	Establish a methodology for determining if people from different racial groups are subject to different levels of risk to their health and safety	Needs to be considered further in the light of the findings of the research into risk and ethnicity (Action Point 7)
23	Complete research into whether workers from different racial groups are exposed to different levels of occupational stress, including what	Completed. Research report published January 2005. Now considering findings

Action point	Action	Progress report
	influence workplace harassment may have on levels of stress	
24	Implement monitoring to determine if there are inequalities in those making enquiries	Appropriate action needs to be considered in the context of the wider monitoring strategy
25	Deliver seminars for all operational staff in FOD and RI explaining recent amendments to guidance relevant to racial equality, including use of interpreters	Ongoing. 5 half-day sessions run in 2003/4. Further sessions currently being given to all visiting staff.
26	Deliver a seminar to staff in Policy Group and CoSAS on the relevance of social inclusion issues, including racial equality, to their policy development work.	A bench-marking study into good practice in diversity policies and practices in the public sector has been commissioned and is complete. This to be considered in the light of consideration of the study's findings and other aspects of how HSE delivers Diversity at Board level.
27	Following review, implement new internal guidance to improve consultation with ethnic minority stakeholders during the general policy development process	Needs to be considered in the context of the new emerging Communications Strategy
28	Ensure that all HSC Priority Programmes have included consideration of racial equality issues in their plans	No action beyond that taken against Action Point 2. Further action to be considered in the light of the research into risk and ethnicity (Action Point 7) and the study on social inclusion (Action Point 26)
29	Establish a system for monitoring complaints made against HSC/E by racial group of complainant	Needs to be addressed in the context of the wider monitoring strategy

Policies and Procedures Affecting our Staff

Action Point	Action	Progress report
30	Review HSC/E pay policy issues not already addressed in the review of performance management system (Action Point 16)	No evidence from audit that other pay policies adversely impact on staff from ethnic minority groups.
31	Review policy on staff taking time off	The main issue is about granting special leave for religious purposes. No evidence that any particular ethnic minority group is disadvantaged by our current arrangements.

PROGRESS AGAINST YEAR 3 ACTIONS PROJECTED FOR COMPLETION BY 31 MAY 2005

Policies and Procedures Affecting the Public

Action Point	Action	Progress report
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Action Point	Action	Progress report
32	Develop a methodology aimed at determining if the rate of accident and ill-health reporting varies according to the ethnicity of the persons affected	Warwick University research suggests difficulties in doing this (see action point 7). Need to review in light of Warwick's findings.
33	Review the effect of revised HSC/E policies on people from different racial groups in the offshore oil and gas industry	Not yet delivered because of structural re organisation.
34	Review the effect of revised HSC/E policies on people from different racial groups in hazardous installations	As above – per 33.
35	Review good practice on race equality established elsewhere in HSC/E and adopt relevant practice in the Nuclear Safety Directorate where appropriate	As above – per 33.
36	Complete the testing of significant issues of pre-existing health policy against the assessment model and identify remedial action identified to be necessary	This needs to take account of the results of the Warwick University Research (see action point 7).

Policies and Procedures Affecting our Staff

Action Point	Action	Progress Report
37	Review the remaining aspects of staff recruitment policy, including advertising, application forms, sift mechanisms and search agencies	Content with findings – work completed no further action
38	Review monitoring arrangements for staff grievance procedures	To be completed by end-May 2005
39	Review monitoring arrangements for staff conduct and disciplinary procedures	To be completed by end-May 2005
40	Review policy on further education for staff	Work still to be carried out to review in terms of race issues
41	Review staff absence procedures	Review overtaken by work in connection with Ministerial Task Force on absence management
42	Review procedures and practice for referral of staff to occupational medical advisers	Improved access to on site occupational health care has been made. Ongoing monitoring of the system.
43	Monitor our arrangements for managing the performance and development of staff in their first 12 months of employment probation procedures	Work still to be done because of difficulties with current systems of monitoring
44	Review monitoring arrangements relating to staff leaving HSE	To be completed by end-May 2005
45	Review staff expenses code	Work on other priorities has prevented this being taken forward so far.