

Queensland Health

Equity and Diversity

Strategic Plan 2007-2010

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**Queensland
Government**
Queensland Health

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Director-General's message

Queensland Health is a major provider of health services to the Queensland community. It is imperative that we as an organisation and as individuals, value the diversity of our workforce which is reflective of the diverse community we serve.

The Queensland Health Equity and Diversity Strategic Plan 2007-2010 reinforces our commitment to the principles of equity and diversity in public sector employment.

Our vision for workforce diversity and equity is to create inclusive work environments that are free from all forms of unlawful discrimination and where people are valued for their diverse experiences, knowledge and abilities.

Queensland Health is committed to the principles and goals of the *Equal Opportunity in Public Employment Act 1992* and will take an active interest in meeting those goals through the implementation of the Queensland Health Equity and Diversity and Strategic Plan 2007-2010.

Uschi Schreiber
Director-General

June 2007

1. Introduction

Queensland Health is committed to creating an inclusive work environment that is free from all forms of unlawful discrimination and where all individuals are valued and supported.

The Queensland Health Equity and Diversity Strategic Plan 2007-2010 details strategies aimed at increasing the representation of people from the Equal Employment Opportunity (EEO) target groups:

- women
- Aboriginal and Torres Strait Islander (A&TSI)
- people from non-English speaking backgrounds (NESB)
- people with a disability (PWD).

The Strategic Plan will eliminate unlawful discrimination against members of the EEO target groups with respect to all employment matters.

2. What is equal employment opportunity?

The principles of EEO are about eliminating unlawful discrimination and decreasing employment barriers for people who may experience disadvantages and hardship, such as target group members.

EEO components:

- enable EEO target group members to compete for recruitment, selection, promotion and pursue career development opportunities as effectively as those who are not members of the target groups
- eliminate unlawful discrimination on the basis of race, gender and ethnicity by agencies and agency employees.

Key EEO goals:

- achieve a representative public sector workforce that reflects the community it serves
- ensure a positive workplace culture committed to valuing employees' diverse skills, knowledge and experience, and free from discrimination and harassment.

3. Implementation of the Plan

3.1 Queensland Health EEO Operational Plan

This plan is developed by the Queensland Health Employment Equity Advisory Committee (EEAC) annually and outlines specific new and ongoing strategies that will be implemented each financial year under the key areas identified in the Strategic Plan.

3.2 Roles and responsibilities

The role of the Director-General

The Director-General is responsible for ensuring Equal Employment Opportunity within Queensland Health.

The role of Human Resources Branch

The Director-General has assigned operational responsibility for equity and diversity to the Senior Director, Human Resources Branch.

The Human Resources Branch provides advice and assistance to the Director-General on matters relating to equity and diversity through:

- coordination of the Employment Equity Advisory Committee (EEAC)
- coordination of Queensland Health EEO Compliance Report
- development of equity and diversity policy in consultation with Area Health Services and Health Service Districts
- coordination of the review of the annual EEO Operational Plan in consultation with EEAC representatives from Area Health Services and Health Service Districts
- coordination and maintenance of the QHEPS Equity site
- interpretation of policy and assistance with implementation of equity and diversity strategies.

The role of General Managers, District Managers, Clinical Chief Executive Officers and Directors of Clinical Statewide Services

General Managers, District Managers, Clinical Chief Executive Officers and Directors of Clinical Statewide Services are responsible for implementing the equity and diversity initiatives and for ensuring unlawful discrimination does not occur within their work area.

Areas of accountability:

- providing leadership on the implementation of equity and diversity initiatives
- ensuring compliance with legislative obligations
- ensuring strong links exist between equity and diversity principles and the strategic/business/operational plans for the District
- committing appropriate resources to support and implement equity and diversity initiatives for the District through the budget process
- ensuring development of a Area Health Service/Health Service District EEO Operational Plan, which reflects the objectives and initiatives identified in the Queensland Health Equity and Diversity Strategic Plan
- ensuring target group members are consulted regarding the development, implementation and evaluation of equity and diversity initiatives

- ensuring that equity and diversity considerations are incorporated into the deliberations of senior decision-making forums
- reporting on implementation of the EEO Management Plan strategies and outcomes for target groups to Human Resources Branch as required
- ensuring that equity and diversity principles are integrated into everyday management practice and all human resource management practices.

The role of managers and supervisors

The Equity and Diversity Strategic Plan 2007-2010 emphasises the important role that managers and supervisors have in achieving equity and diversity outcomes in the workplace. All managers and supervisors are responsible for implementing equity and diversity principles and ensuring unlawful discrimination does not occur in their workplaces. These responsibilities include:

- demonstrating personal leadership and commitment to equity and diversity goals
- being aware of the requirements of the *Equal Opportunity in Public Employment Act 1992* and the *Anti-Discrimination Act 1991*
- being familiar with and promoting relevant policies including the Queensland Health Diversity Policy, Equal Employment Opportunity Policy, Anti-Discrimination Policy, Sexual Harassment Policy, Reasonable Adjustment Policy, and the Equity and Diversity Strategic Plan 2007-2010
- modelling and promoting appropriate behaviour in relation to equity and diversity principles and practices (eg. in relation to job design, recruitment and selection, training and development, performance management, management of organisation change and the application of employment conditions)
- implementing work practices, policies and strategies to eliminate unlawful discrimination from their work areas
- ensuring work areas are free from harassment of any kind, including sexual harassment
- encouraging and assisting all staff, including target group members to take up developmental and career opportunities
- promoting cultural awareness and cultural respect
- consulting with all staff as part of decision-making processes
- developing, promoting and supporting the Workplace Equity and Harassment Officers Network within their work unit and District.

The role of Human Resource Management Units

The District Human Resource Management Units are required to provide expert consultant services in relation to equity and diversity matters.

Areas of accountability include:

- developing District EEO Annual Reports
- preparing informal reports on equity and diversity issues as required for Senior Management and the State Bargaining Unit/District Consultative Forum, Employment Equity Advisory Committee
- leading the implementation of equity and diversity initiatives, in particular, staff awareness strategies
- supporting line managers and employees in the successful implementation of initiatives such as the work life balance Flexible Work Arrangements.

4. Whole-of-government EEO reporting framework

The Queensland Health Equity and Diversity Strategic Plan 2007-2010 meets the requirements of an EEO Management Plan as specified by the *Equal Opportunity in Public Employment Act 1992*. As required by legislation, following approval by the Director-General and the Executive Management Team, the Strategic Plan will be submitted to the Public Service Commissioner.

An annual report signed by the Director-General will be lodged with the Office of the Public Service Commissioner to fulfil whole-of-government requirements. Queensland Health will also submit the Minimum Obligatory Human Resource Information (MOHRI) EEO data on an annual basis and undertake any other compliance activities as specified by the Public Service Commissioner and the *Equal Opportunity in Public Employment Act 1992*.

5. Whole-of-government EEO outcomes

The Office of the Public Service Commissioner requires that the Queensland Health Equity and Diversity Strategic Plan 2007-2010 meets the nine whole-of-government outcomes by ensuring that the EEO outcomes are linked to core business and focus on:

- increasing representation
- equal ability to participate on merit for recruitment, selection and promotion
- provide equal access to career development opportunities
- eliminating unlawful discrimination.

The whole-of-government outcomes:

1. a response rate of at least 80 per cent to the EEO census
2. elimination of unlawful discrimination against members of the target groups
3. target group members are able to participate on merit for recruitment, selection and promotion as effectively as non-target group members
4. target group members are able to participate in career development opportunities as effectively as non-target group members
5. continued increase in the representation of women in senior officer and SES positions
6. continued increase in the representation of women in middle and upper management positions
7. continued increase at all levels in the representation of Aboriginal and Torres Strait Islander employees
8. continued increase at all levels in the representation of employees from non-English speaking backgrounds
9. continued increase at all levels in the representation of employees with a disability.

Whole-of-government outcomes one and two are mandatory and Queensland Health must report against these on an annual basis. In addition Queensland Health must identify at least one outcome for each of the target groups.

EEO Management Plan for Queensland Health for period 2007-2010

Priority issue to be addressed	Whole-of-Government outcome	Proposed outcomes	High level strategies to achieve outcomes	Performance indicators to measure achievement of outcomes	Proposed timeframe for achievement of outcomes
EEO census response rate	1	A response rate of at least 80% to the EEO census	<p>Improved education and communication of EEO collection objectives.</p> <p>Completion and collection protocols at point of employment.</p> <p>EEO census form redesigned to improve accessibility (online).</p> <p>Improved data entry.</p> <p>Follow up on non-return of forms.</p> <p>Annual census for non-respondents.</p>	MOHRI response rate as at 30 June 2008, 2009, 2010.	Annually
Unlawful Discrimination	2	Elimination of unlawful discrimination against target group staff	<p>Management training on flexible selection processes.</p> <p>Audit and identify current educational and development programs for cultural components.</p> <p>Reinvigoration of the Workplace Equity Harassment Officers (WEHO) Network.</p> <p>Development of HR Practitioners Network as support group for WEHO.</p> <p>Ongoing reinforcement of workplace behaviours reflecting the Code of Conduct.</p> <p>Implementation of Practical People Management program.</p> <p>Improving the use of exit interviews and the information collected.</p>	<p>Number of formal grievances based on acts of unlawful discrimination.</p> <p>Number of Anti-Discrimination Commission cases.</p> <p>Percentage of workforce trained in EEO and anti-discrimination.</p> <p>Percentage of managers completed Practical People Management training.</p>	Annually

6. Progress towards employment targets

The Office of the Public Service Commissioner (OPSC) has established Queensland Public Sector targets for people from non-English speaking backgrounds, Aboriginal and Torres Strait Islander peoples and women in management. The OPSC monitors the performance of Queensland Public Sector agencies in achieving the targets outlined below.

Queensland Health is progressing towards the achievement of employment targets of Aboriginal and Torres Strait Islander employees, employees from non-English speaking backgrounds, as well as the percentage of employees with a disability. This data is collated from EEO census forms completed by staff and therefore does not necessarily reflect the true status of progress towards employment targets.

The data for each target group is explained in more detail in this report.

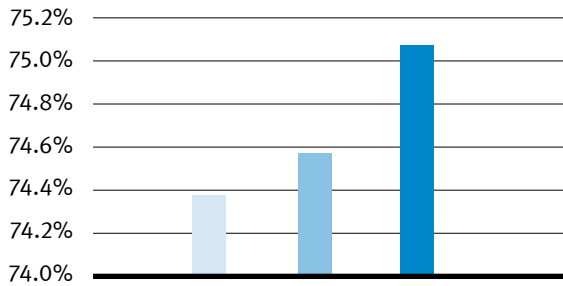
Queensland Public Service and Queensland Health targets compared to actual representation, October - December 2006

Targets	Aboriginal and Torres Strait Islander		Non-English speaking background		People with a disability	
QPS target (OPSC)	2.4% of all employees at all salary levels in the sector by the end of the year 2010		13.5% of employees at each salary level by the end of 2010		No target No targets have been established for people with a disability. The complexity of identifying the number of people with a disability who are able to work, coupled with the range of disability types and the variability in the extent of disability, make it difficult to set one target based on representation in the community. There is an expectation that employment figures for this target group should continue to improve.	
Queensland Health target	As per QPS target		As per QPS target		No target	
Queensland Health actual representation as at final quarter 2006	Salary level	%	Salary level	%	Salary level	%
	\$100,000 +	0.5%	\$100,000 +	16.5%	\$100,000 +	3.5%
	\$90,000 - \$100,000	0.3%	\$90,000 - \$100,000	14.8%	\$90,000 - \$100,000	4.5%
	\$80,000 - \$90,000	1.1%	\$80,000 - \$90,000	20.2%	\$80,000 - \$90,000	3.5%
	\$70,000 - \$80,000	1.3%	\$70,000 - \$80,000	13.2%	\$70,000 - \$80,000	3.7%
	\$60,000 - \$70,000	1.4%	\$60,000 - \$70,000	8.4%	\$60,000 - \$70,000	4.3%
	\$50,000 - \$60,000	1.4%	\$50,000 - \$60,000	9.1%	\$50,000 - \$60,000	3.7%
	\$40,000 - \$50,000	3.1%	\$40,000 - \$50,000	7.6%	\$40,000 - \$50,000	3.2%
	\$30,000 - \$40,000	3.4%	\$30,000 - \$40,000	7.5%	\$30,000 - \$40,000	4.1%
	\$20,000 - \$30,000	10.1%	\$20,000 - \$30,000	5.8%	\$20,000 - \$30,000	1.3%
	\$20,000 - and less	10.1%	\$20,000 - and less	3.4%	\$20,000 - and less	2.2%
		Total		Total		Total
		2.36%		9%		3.8%

Women

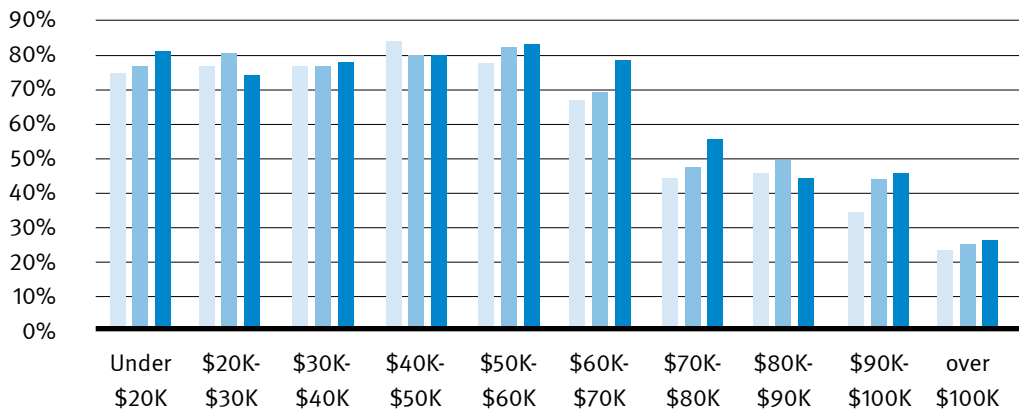
Representation of women in Queensland Health is increasing overall. As of 2006 Queensland Health has achieved the overall level of representation at 75.1 per cent, which is consistent with health care industry standards.

Numbers of women employees in Queensland Health are increasing



There is notable increase in five of the six highest salary bands which can be attributable to increased career opportunities and promotion for women.

Career opportunities are generally improving for women in the higher salary bands

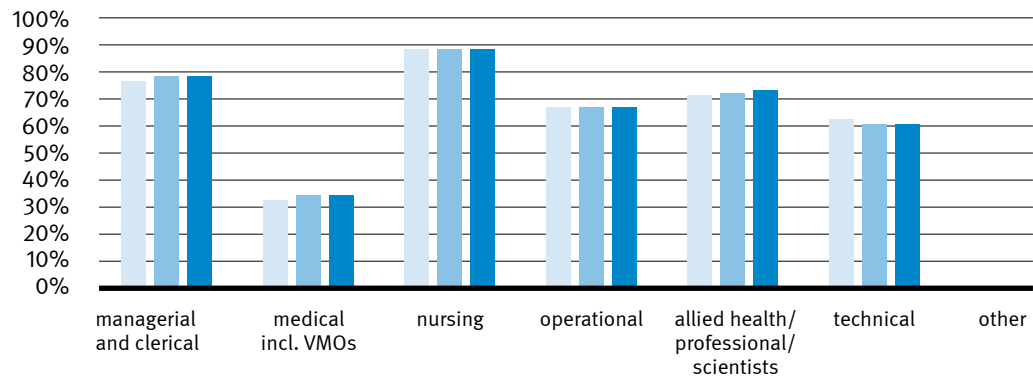


Source: MOHRI data

legend: 2004 2005 2006

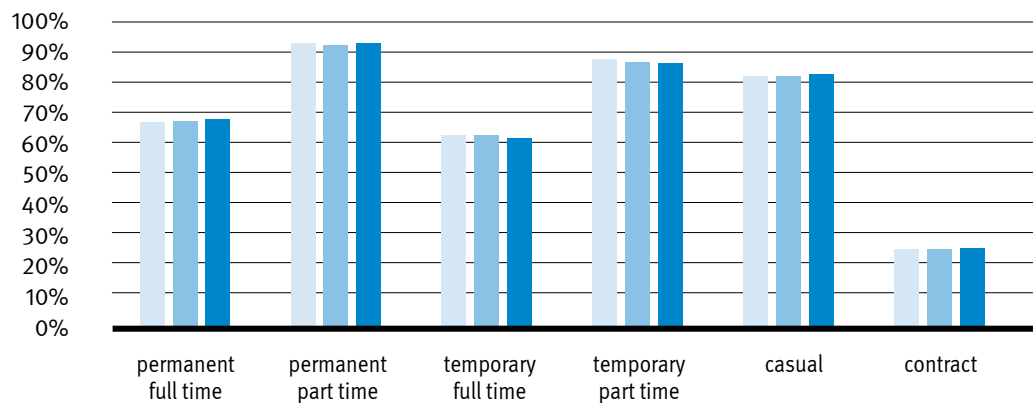
Women continued to be highly represented in nursing over the 2004-2006 period. Representation in the managerial, administrative, professional, operational and technical streams remained consistent. There was a slight increase in representation of women in the medical and allied health occupation streams.

Women remain highly represented in nursing, while the medical stream has seen slight increases



The representation of women in permanent full-time work has remained constant, whilst the use of temporary employment decreased over the period. The representation of women in part-time and casual employment was stable over the three year period. This could be attributable to the implementation of flexible work options, such as part-time work and job share arrangements.

The representation of women across all working arrangements has remained stable



Source: MOHRI data

legend: 2004 2005 2006

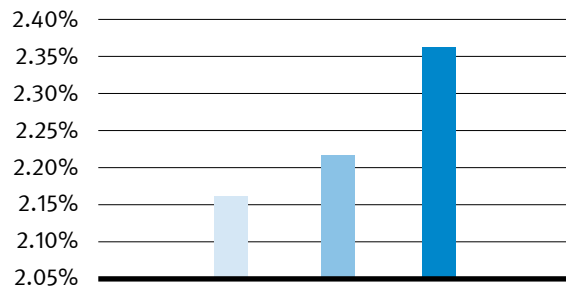
EEO Management Plan for Queensland Health for period 2007-2010:
Women

Priority issue to be addressed	Whole-of-Government outcome	Proposed outcomes	High level strategies to achieve outcomes	Performance indicators to measure achievement of outcomes	Proposed timeframe for achievement of outcomes
Representation of women in middle and upper management positions	3,4,5,6	Maintain representation in middle and upper management across Queensland Health at 50.4% or above.	<p>Improve education and awareness of flexible work practice arrangements to job applicants (both internal and external) and managers.</p> <p>Revise relevant policies including flexible work arrangements telecommuting and childcare and communicate changes to the workforce.</p>	<p>MOHRI data</p> <p>Number of women in A06 or equivalent and above positions by occupational group.</p>	Annually
	3,4,5,6	Improved retention of women aged 30-45.	Implement mentoring program for women in A06 or equivalent positions and above.	Number of women 30-45 in June 2008, 2009, 2010.	

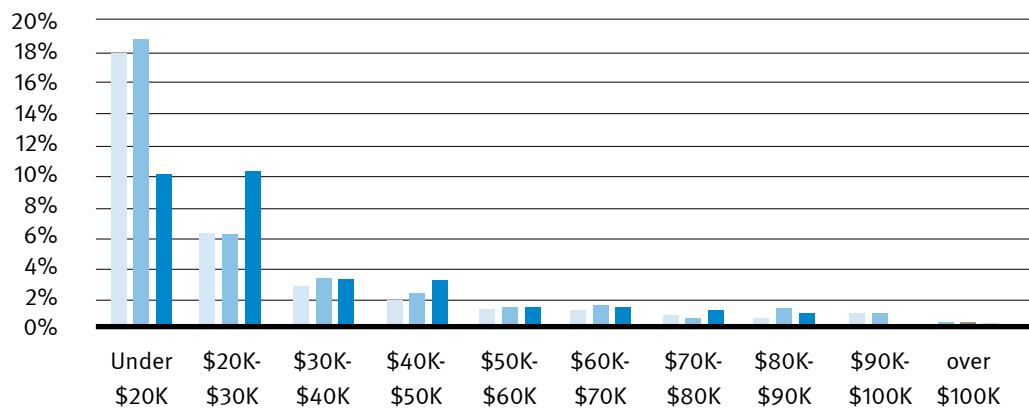
Aboriginal and Torres Strait Islanders

The Aboriginal and Torres Strait Islander representation shows a steady increase over the 2004-2006 period. The 2.36 per cent representation in 2006 compares favourably to the public sector target of 2.4 per cent across all salary levels by 2010.

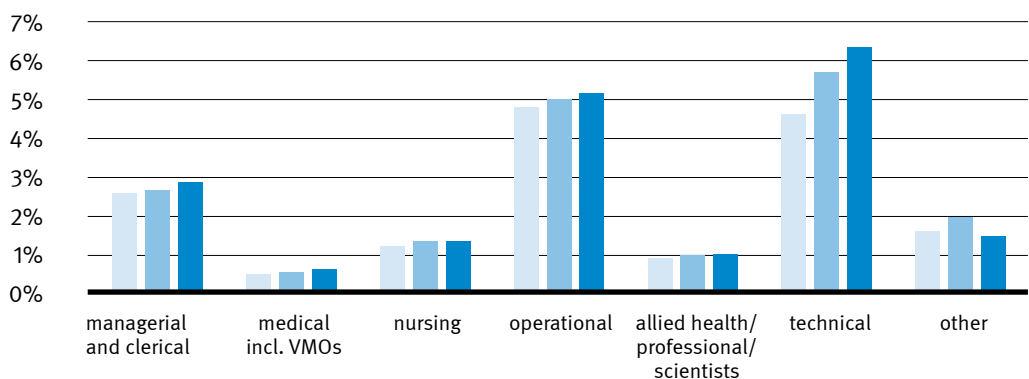
Overall the Aboriginal and Torres Strait Islander representation is in alignment with the public sector target



By salary levels the majority of Aboriginal and Torres Strait Islanders are represented in the lower salary bands



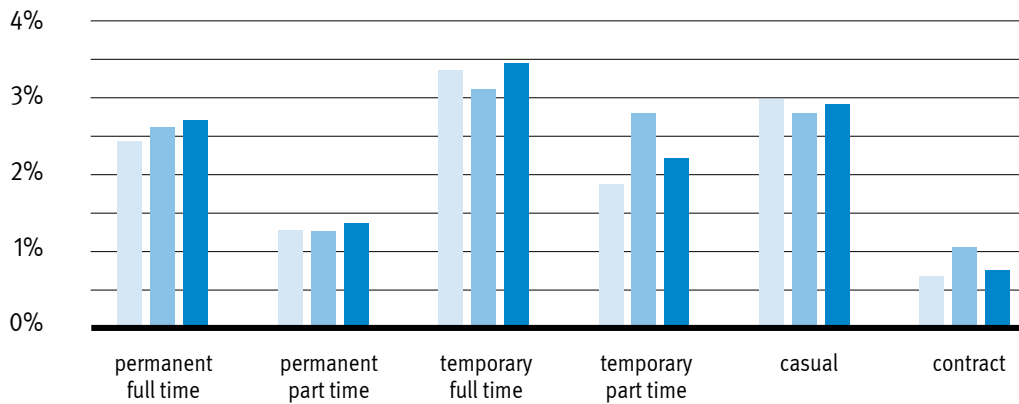
Aboriginal and Torres Strait Islanders are most highly represented in the technical and operational streams



Source: MOHRI data

legend: 2004 2005 2006

The representation of Aboriginal and Torres Strait Islanders across all working arrangements has remained relatively stable



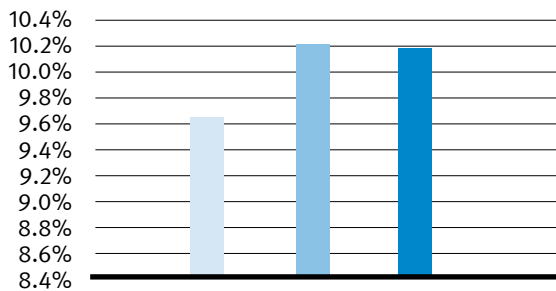
EEO Management Plan for Queensland Health for period 2007-2010:
Aboriginal and Torres Strait Islander people

Priority issue to be addressed	Whole-of-Government outcome	Proposed outcomes	High level strategies to achieve outcomes	Performance indicators to measure achievement of outcomes	Proposed timeframe for achievement of outcomes
Representation of Aboriginal and Torres Strait Islander employees	3,4,7	Increasing indigenous workforce across the health sector by .3%.	Review current advertising methods to widen applicant pool (local communities). Statewide promotion/ profiling of successful indigenous health professionals. Identify key Aboriginal and Torres Strait Islander roles in area service plans. Improve support to trainees and temporary employees to obtain permanent positions. Implement the Aboriginal and Torres Strait Islander Health Worker Career Structure.	MOHRI data Number of Aboriginal and Torres Strait Islander people at each salary level and occupational stream.	Annually
	3,4,7	Increased representation in leadership/ management roles across all disciplines.	Implement mentoring programs for indigenous workforce. Identify current leadership/ management Aboriginal and Torres Strait Islander positions and target leadership/management indigenous training.	The percentage of Aboriginal and Torres Strait Islander employees participating in a mentoring program.	Annually
	3,4,7	Culturally aware/ respectful employees.	Implement the Cultural Respect Framework.	Percentage of employees participating in the Cultural Awareness Program.	

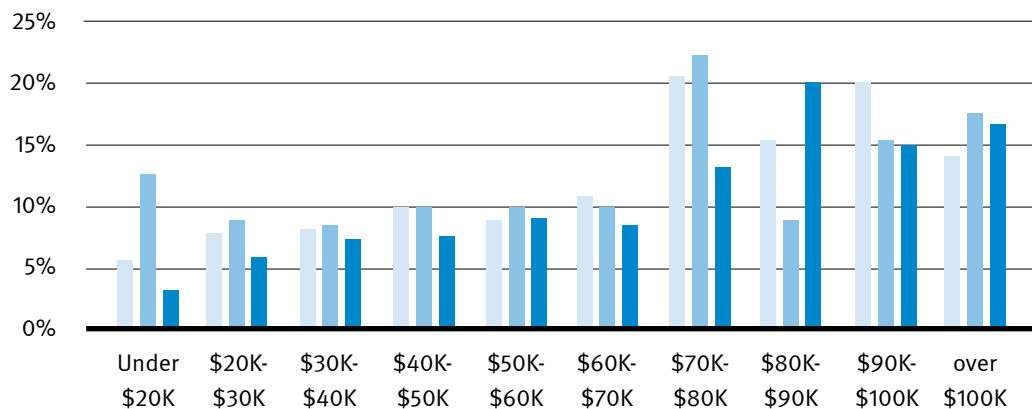
People from a non-English speaking background

The representation of employees from a non-English speaking background (NESB) within Queensland Health has remained stable. The current representation of 9 per cent is working towards the Queensland Government target of 13.5 per cent by 2010. This group is well represented in the higher salary bands due to their high representation in the medical stream.

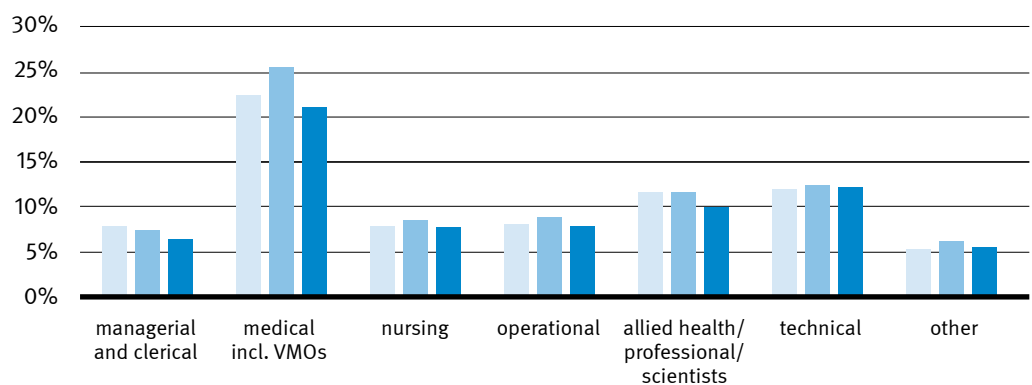
Representation of employees with a non-English speaking background has remained stable



Employees from a non-English speaking background are well represented in the higher salary bands due to high representation in the medical stream



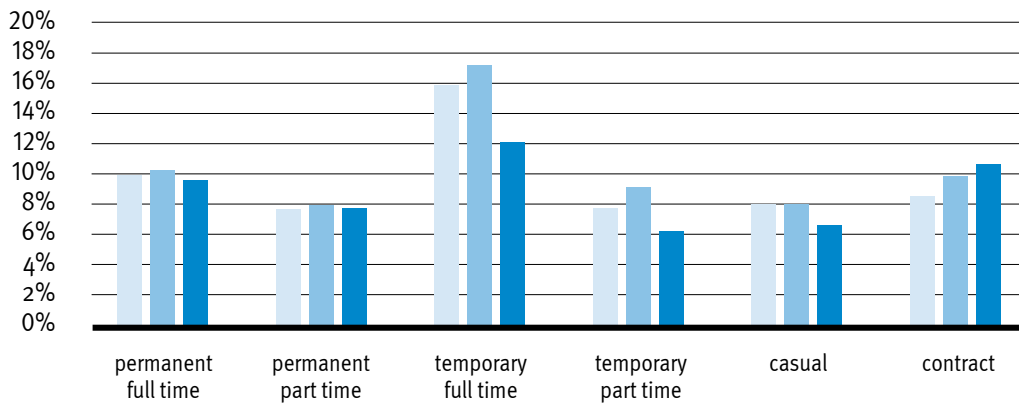
Employees from a non-English speaking background are most highly represented in the medical stream



Source: MOHRI data

legend: 2004 2005 2006

There has been a decrease in employees from a non-English speaking background in temporary full-time and part-time working arrangements



Source: MOHRI data

legend: 2004 2005 2006

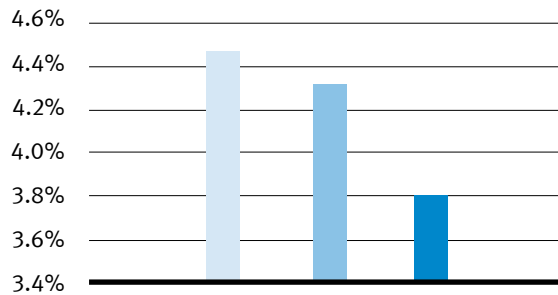
EEO Management Plan for Queensland Health for period 2007-2010:
Non-English Speaking Background

Priority issue to be addressed	Whole-of-Government outcome	Proposed outcomes	High level strategies to achieve outcomes	Performance indicators to measure achievement of outcomes	Proposed timeframe for achievement of outcomes
Representation of employees from non-English speaking background	3,4,8	Increased representation of employees from NESB across Queensland Health by .3%.	Key documents audited in languages other than English and deficits addressed. Review recruitment practices to increase NESB participation. Implement tool kit for selection panels and review induction modules. Participate in the migrant work experience program.	MOHRI data Number of people from a non-English speaking background at each salary level and occupational group. Increased participation in the migrant work experience program.	Annually
	3,4,8	Improved English language competencies.	Collaborate with registration boards on English language competency issues. Increase participation in English and Literacy Program.	Increased participation rates of people from a non-English speaking background.	
	3,4,8	Increase retention of overseas trained professionals.	Offer specific traineeships for NESB employees. Develop specific strategies targeting retention of overseas trained professionals.		

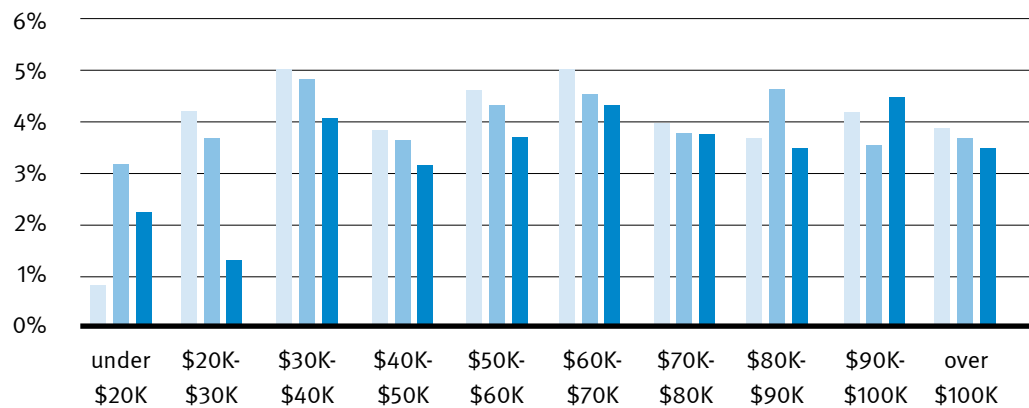
People with a disability

Queensland Health's performance in relation to people with a disability is less than satisfactory during the period 2004-2006. Representation of people with a disability in Queensland Health is declining steadily overall as well as declining in most salary and stream groups. This data demonstrates a need to focus on improvements in this target group.

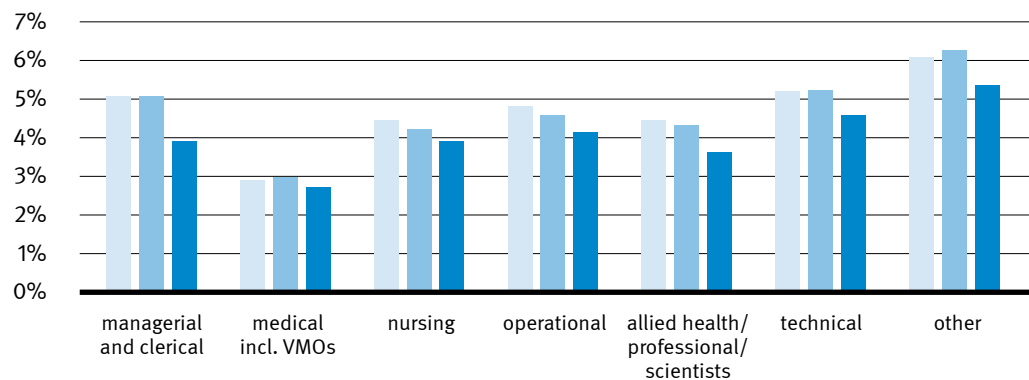
There is a decrease in representation of people with a disability



There is a relatively even representation of people with a disability across salary bands



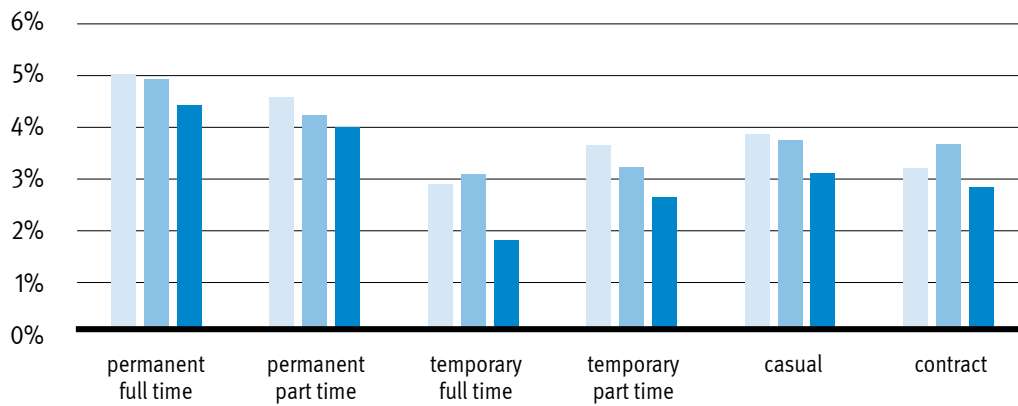
Representation of people with a disability is relatively evenly distributed across occupational streams



Source: MOHRI data

legend: 2004 2005 2006

The decrease in employees with a disability has been experienced across all working arrangements



Source: MOHRI data

legend: 2004 2005 2006

EEO Management Plan for Queensland Health for period 2007-2010:
People with a Disability

Priority issue to be addressed	Whole-of-Government outcome	Proposed outcomes	High level strategies to achieve outcomes	Performance indicators to measure achievement of outcomes	Proposed timeframe for achievement of outcomes
Representation of employees with a disability	3,4,9	Increased representation of employees with a disability across Queensland Health by .3%.	<p>Establish network with key external disability groups.</p> <p>Review the Queensland Health reasonable adjustment framework and communicate improvements.</p>	<p>MOHRI data</p> <p>Number of people with a disability at each salary level and occupational group.</p>	Annually
	3,4,9	Increased retention of employees with a disability including acquired disability.	<p>Undertake environmental audit to see what public and private sector organisations are currently doing to improve representation of employees with a disability.</p> <p>Improving management practices on the use of exit interviews and the information collected.</p> <p>Undertake job analysis of position descriptions as they become vacant to eliminate potential sources of indirect discrimination.</p>	<p>MOHRI data</p> <p>Number of people with a disability at each salary level and occupational group.</p>	Annually

Contact information

If you wish to obtain further details regarding the Queensland Health Equity and Diversity Strategic Plan 2007-2010 please contact the Human Resources Branch on 3234 1921.

Minimum Obligatory Human Resource Information

The statistical data in this plan has been supplied by Queensland Health HR Informatics, Data Reporting and Analysis Centre from the Minimum Obligatory Human Resource Information (MOHRI) data.

MOHRI has been developed to ensure the Queensland Government has access to human resource information which is required for strategic management issues with the Queensland Public Sector. The information is used to develop a profile and understanding of the Queensland Public Sector, identify various trends and develop and evaluate sector-wide human resource policies.