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EXTERNAL DIVERSITY PROGRESS REPORT 2008-09 AND EXTERNAL DIVERSITY PRIORITIES FOR 2009-10			

Purpose of the paper

1. This paper invites the Board to note progress on **external diversity** priorities for 2008-9 (paragraphs 5 and 7 and Annex 1) and approve:
 - the draft new Diversity Vision which has been amended slightly to reflect the language and direction of the new strategy (paragraph 6 and Annex 3)
 - the priorities in the Diversity Action Plan (DAP) for 2009-10 (paragraph 8 and Annex 2)

Background

2. Previous reports on diversity have considered both external (how we ensure our polices and services take account of diversity) and internal (staff) diversity issues. In the context of the Board discussion on workforce planning, the Chair asked that future reports on the internal diversity agenda be incorporated into consideration of that area

3. In line with the approach agreed last year, the 2008-9 and 2009-10 priorities include those already agreed by the Board in our statutory equality schemes for race, disability and gender. In line with best practice across the public sector, and in readiness for the implementation of the Equality Bill, they also include all other diversity strands (age, sexual orientation, religion or belief). The priorities for 2009-10 include actions carried forward from the 2008-09 plan where not already delivered. They also take account of internal and external views.

4. HSE's Diversity Steering Group (DSG), which includes senior management, TU and staff diversity network membership, have approved the progress report, draft vision and new action plan.

5. On External Diversity the main highlights for 2008-9 were:

a. A sustained effort to continue to embed equality considerations into our normal working practices through the use of the Equality Impact Assessment (EIA) tool and communications toolkit for new policies, practices and activities. This included significant effort on training new Redgrave Court based staff on EIAs and on assisting colleagues preparing EIAs.

b. Delivery of a substantial communications plan. Examples include the launch of diversity web pages in December 2008 and articles in both the Local Authorities and HSE Health and Safety newsletter. By working closely with colleagues in Communications Directorate we were able to develop the web pages to suit the needs of different stakeholders: improving accessibility to

information, research, case studies and good practice. We will develop the pages further over the next year.

c. Significant progress on gender actions. This has included: consolidating research and identifying future actions e.g. priorities for gender pages will be male and female reproductive health, pregnancy and older workers; and widely promoting our advice on pregnant workers, for example at an environmental officer's conference and through participation in a cross-government initiative bringing together web based wider maternity advice and guidance.

d. Extending and expanding contact with key stakeholders. We have developed a working relationship with the DWPs Equality Schemes Stakeholder Group; this has enabled us to make progress on the effective involvement of disabled people and has helped us to establish contact with a wider group of stakeholders from across all equality strands. We continue to build our working relationship with the TUC Gender Occupational Safety and Health Group (GOSH) and the main health and safety practitioners group. We recently attended a meeting of the main TUC group to outline the work of HSE's External Diversity Team leading to a useful exchange of information and views. This presentation has led to invitations to further stakeholder work, for example speaking at the TUC Education Officer's Training Course. Internally, HSE's staff networks have also been helpful and a useful source of expertise.

e. Externally, much good work has been done in the field. Examples include sponsoring a slot on an ethnic radio station, organising an event for young people in a local college, developing a plan to provide advice to firms using a business centre run by a local Sikh temple, building relationships and working with organisations focusing on migrant workers and using an HSE inspectors language skills to promote key health and safety messages to speakers of Urdu, Hindi and Punjabi, details are on HSE's diversity web pages.

(<http://www.hse.gov.uk/diversity/hse.htm>).

Argument

6. **Updating the vision.** With the development of HSE's new strategy, the DSG felt that it was timely for the existing vision to be refreshed. The new draft statement, which reflects the direction and language of the strategy, is contained in Annex 3. and the Board is invited to formally endorse it.

7. On external diversity good progress has been made towards achieving the objectives for 2008-09. We have continued to see the integration of equality considerations into our day to day business, for example, through the increase in Equality Impact Assessments; we have improved our understanding of issues relating to other diversity strands and we have taken opportunities to raise awareness of diversity and communicate messages. Outstanding actions from 2008-09 will be given some priority in 2009-10; they include work on women safety representatives and stress and mental health.

8. **Priorities 2009-10.** We want to build on our progress to date and externally this means setting six broad areas for our action plan, as follows:

a. Preparation of a single equality scheme (SES). In order to match good practice across the public sector and in bearing in mind the provisions in the Equality Bill currently before Parliament HSE is preparing a single equality scheme (SES) which will broaden our existing schemes to cover the additional diversity strands of age, sexual orientation, and religion or belief, where there has been a legislative base for some time. There will be a public consultation exercise over the summer, with a paper going to the Board seeking approval of the SES in November 2009 and publication in March 2010.

There may be other aspects of the Equality Bill for HSE to take account of later e.g. the proposed socio-economic duty (a duty on a body, when making decisions of a strategic nature about how to exercise its functions, to have due regard to the desirability of exercising them in a way that is designed to reduce the inequalities of outcome from socio-economic disadvantage).. However, Government thinking on how public bodies should take account of this will be developing in the next few months (with a public consultation planned this summer). Any such new duty would come into force in April 2011 so HSE can plan to take account of it as necessary in years 2 and 3 of the proposed scheme.

b. Continuing to embed equality considerations in our work. In the past 2 years, we have made sustained efforts to ensure EIAs of new work are carried out. This work will continue, but during 2009-10 we need also to ensure that EIAs are carried out for key areas of continuing work where the development preceded that of the EIA toolkit. The DSG will be overseeing this work; work already agreed includes the health programmes. Any new issues identified will be fed into the planning process for 2010-11. We will provide training for new staff and sector staff and provide advice and support for colleagues; all leading to equality considerations being routinely considered as part of the policy making process.

c. Partnership work on age. HSE will work with DWP Age Positive campaign, agreeing key messages on health and safety and ageing, producing guidance material and jointly promoting to a wide number of stakeholders.

d. Sustain our focus on communication: HSE will produce core health and safety information in a range of alternative formats, including Braille, Easy Read, English, Welsh and British Sign Language, large print and audio; we will develop the diversity web site; and run campaigns focussing on specific groups e.g. agriculture campaign focussing on older workers and parents

e. Ensuring that equality issues are illuminated in a number of major research projects on health in order to inform future policy development e.g. estimating the cancer burden, correct face fit of respiratory protective equipment (RPE), respiratory disease in the bakery industry etc.

- f. A continued focus on stakeholder engagement.** FOD, Sectors and Policy colleagues will continue engagement/ involvement with a range of stakeholders, building relationships and sharing information and advice, including enforcement action where necessary.

Presentation

9. The progress report, vision and the new action plan will be promoted on the HSE website and news centre, and additionally to HSE staff through the intranet, in the news centre and *e-express*. They will be made available in alternative formats upon request.

Action

10. Board members to note the progress made on external diversity for 2008-09 and note and endorse the External Diversity Action Plan for 2009-10 and note and endorse the new vision.

Paper clearance

12. By the Senior Management Team on (3 June 2009).

EXTERNAL DIVERSITY PROGRESS REPORT 2008-9

Key area 1 To raise awareness amongst staff of the benefits of diversity; HSE's vision for diversity and the need for further progress in HSE	
Mechanisms in place to publicise and drive the vision.	<p>Good progress has been made on publicising the vision. An extensive communications plan is in place with a number of articles in e-Express and in the 'What's New' section of the intranet.</p> <p>Presentations given to new B4 policy advisers and a flyer produced and promoted at a Local Authority event.</p> <p>The Diversity Steering Group (DSG) met regularly and has monitored plans and provided guidance on how to progress the work.</p>
Key area 2 Build and make better use of the evidence base in our policies and operations	
To develop an HSE website on diversity	<p>The website pages were launched December 2008 and will be a continuing area of development. The pages were publicised in Partnership News, the What's new E-bulletin and will be publicised in the Health & Safety Newsletter.</p>
Review and consolidate existing research	<p>Good progress made with this action. A review on gender has been completed and priority areas for action identified as: male and female reproductive health; older workers; pregnant workers. Work here will link in to new work programmes and take account of HSE's new strategy.</p> <p>Literature searches have been completed on race, religion or belief and disability.</p> <p>Research was commissioned and carried out by Edge Analytics and Leeds University on risks to migrant workers. This did not disclose any evidence of elevated risk to migrant workers compared to other groups of workers, despite an extensive review of the available literature.</p> <p>An expert seminar to discuss the findings was held on 26 January. Discussion on further actions needed await completion of a review of research conducted elsewhere in the EU.</p>

<p>HSE seeking participation in the I~Work Consortium for the New Dynamics of Ageing (NDA) research initiative.</p>	<p>The research proposal that HSE intended to support was unsuccessful in its bid for funding. Following consideration of various options the DSG agreed that HSE should work closely with DWP's Age Positive Programme to develop key messages on health and safety and ageing. This will include producing back-up material such as a hard copy fact sheet or some other form of guidance</p> <p>The External Diversity Team (EDT) attended the following conferences on ageing: TAEN conference in Oct 08 EC Conference in Nov 08</p>
<p>Initial scoping work to identify agenda for religion and belief and sexual orientation.</p>	<p>Following discussion with SAGE (the staff network for LGBT staff) in September 2008 useful contact has been made with the Gay Business Association (GBA) and Stonewall.</p> <p>Work has been undertaken to identify industries where there may be a higher proportion of LGBT staff. However, there appears to be no useful data available on this topic.</p> <p>Communications Delivery Services (CDS) are in correspondence with SAGE re use of appropriate media to engage LGBT community.</p>
<p>To produce a communications brief to summarise the key findings about what causes accidents to migrant workers, and what to do to prevent them. (based on Construction Division study).</p>	<p>Brief delivered to Ops Managers at June HoOps Forum, and subsequently cascaded to visiting staff. This will also be incorporated into a forthcoming revision of the Migrant Workers inspection topic pack.</p>
<p>Key area 3 Designing interventions to take account of different needs and impact on particular groups and so help improve health and safety</p>	
<p>To continue to ensure equality considerations are embedded in our normal working practices.</p>	<p>New simplified guidance for staff completing Equality Impact Assessments (EIA) has been drafted. This now has to be formatted to enable it to go on HSE's intranet.</p> <p>The joint DRC/ HSE guidance on health and safety management and disability is now more accessible by</p>

	<p>production of a large print and easy read version of the guidance.</p> <p>Analysis of the Latest Fit 3 data is being analysed by diversity category, though there is some concern about sample size for diversity purposes.</p> <p>Colleagues in the field have provided examples of their outreach work throughout the year http://www.hse.gov.uk/diversity/hse.htm</p>
<p>To require through early interventions that the Olympic Delivery Authority and the Principal Contractors have systems in place to check competence and provide appropriate health and safety induction for all workers</p>	<p>The Olympic Delivery Authority (ODA) specifies in its Health, Safety and Environment Standard that it is the supplier's responsibility to effectively communicate with all its staff including non-English speaking personnel such that all site health and safety requirements are understood, including emergency arrangements.</p> <p>Workers who are not competent in the English language must be able to give oral instructions and warnings. The supplier is responsible for ensuring compliance with the ODA standard by providing all workers, including non-English speaking staff, with a health and safety induction in a form they understand before commencing work on site.</p> <p>HSE has discussed this area with the ODA Head of Health and Safety, who has provided assurance that the Standard is invariably complied with.</p>
<p>To develop and issue advice for managers on how to help people at work suffering from mental health issues connected with work-related stress and how to help those absent from work with such conditions.</p> <p>Accessibility of HSE Web pages</p>	<p>The new web pages were launched in December, ahead of schedule.</p> <p>Staff changes and other priorities meant that the full brief for managers on stress and mental health needs to be taken forward to the next operating year. Until then is completed anyone accessing the diversity web pages will be directed to HSE web pages on work related stress</p> <p>EDT met with CDS to discuss issues of accessibility, CDS confirmed they are happy the web pages are accessible as feedback from specialists in the field of accessibility/disability issues has been positive.</p>
<p>To promote our advice on</p>	<p>EDT worked with colleagues across HSE to produce a flyer promoting HSE's guidance and webpages on a</p>

<p>pregnant workers.</p>	<p>range of diversity strands; including guidance for new and expectant mothers..</p> <p>We contributed to a cross- government initiative, led by BERR, to bring together web based wider maternity advice and guidance. Links to our guidance for new and expectant mothers have been placed on a range of websites; in particular business link, BERR.</p>
<p>Key area 4 Reach out to people / organisations with particular understanding of diversity, to improve our policies and delivery and to ensure our advice and information is widely accessible, including for migrant workers</p>	
<p>To work towards improving the diversity of our advisory and stakeholder groups that require representation.</p> <p>(Scientific Advisory Committees, where membership is first and foremost on the basis of expertise, are not within the scope of this action).</p>	<p>Work was undertaken to gather as much information as possible on the composition of major industries supported by advisory groups.</p> <p>There was only limited data on industry by diversity strands. Furthermore the ONS data was not collated in a way that matched the tripartite nature of the groups.</p> <p>What data there was suggested that the membership of the advisory groups reflected the make up of the relevant industries. On this basis the DSG agreed that there was no further action to be taken</p>
<p>Encourage more involvement of women in health and safety decision making by working with others such as the TUC to persuade more women to volunteer to become safety representatives or representatives of employee safety.</p>	<p>Worker involvement is a key part of HSE's new strategy and this work will be reviewed in this context</p> <p>EDT met with the TUC Union Officers at their Health and Safety meeting in January and spoke at the TUC equality training course in March.</p> <p>As a result of meeting with the TUC EDT are increasing their networking with stakeholders as evidenced by requests to speak at the TUC Women's conference and at the NUT conference (November 09).</p>
<p>To develop networks with disability groups and secure involvement of disabled stakeholders in policy development</p>	<p>Following research into ways of engaging with and involving disability groups, two papers were put to the DSG.</p> <p>The DSG agreed that HSE should liaise with the members of DWP's Equality Schemes Reference Group (representing stakeholders from across the</p>

and monitoring.	diversity strands). They also agreed that HSE should work with RADAR who has offered to advertise the opportunity of working with HSE - providing advice to policy group staff where requested. EDT have also obtained some independent offers of assistance by going back to groups who have commented on earlier equality schemes and by advertising the opportunity in the OH newsletter
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DIVERSITY ACTION PLAN 2009 - 2010

Action & Timing	Outcomes and Performance Measures
Preparation of a single equality scheme (SES)	
Development and publication of a single equality scheme for 2010 – 2013 (March 2010)	Scheme complies with equality legislation.
Continuing to embed equality considerations in our work	
HSL to include a check in their Quality System a requirement for HSL staff to ensure, when reviewing specifications, that they do not overtly omit sectors of society. Where possible exclusions are identified then HSL will check that there is reasonable justification prior to undertaking the research. (June 2009)	Quality System updated accordingly and measured by audit outcomes.
To carry out race disability and gender equality impact assessments on back catalogue of policies and services. (December 2009) Ensure that work falling out of HSE's new strategy is equality impact assessed	EIAs produced for policies and services identified that were developed before the requirement for Equality Impact Assessments New work from HSE's strategy equality impact assessed and appropriate documentation produced. Strategy Action Teams ensure EIA s are considered
To train new recruits and others on EIA toolkit. To ensure EIAs are completed when required To monitor and review EIA numbers (September – December 2009)	Training provider appointed that meets contract specification. All recruits new to HSE and existing staff new to policy and sector work are trained in the use of the EIA tool and legislative background
Gender – identify sectors where women and or men are particularly at risk and ensure that example risk assessments for these areas include gender occupational health and safety issues.	Occupational health and safety issues related to gender are mainstreamed in example risk assessments used by employers and other stakeholders

Action & Timing	Outcomes and Performance Measures
<p>Make sure that all workers including migrant workers, whatever their migration status, have equal protection from work-related risk. (1. ongoing with updates to Board annually. 2. Spring 2009)</p>	<p>Develop better channels of communications with workers, developing advice for employers, targeted inspection and enforcement working with other departments and organisations, research</p> <p>Topic inspection pack for visiting staff exists giving guidance and advise on migrant worker issues that need to be addressed and intervention strategies</p>
<p>Agriculture – working with stakeholders as the HSE single point of contact for issues arising from the BERR vulnerable Workers Enforcement helpline, ensuring that issues affecting vulnerable workers, (in particular migrant workers, women and young workers) are dealt with across HSE, including enforcement action where necessary. (2009 onwards)</p>	<p>Effective intervention to deal with working time matters such as type of enforcement action taken. Effective referral of other health and safety issues and enforcement action taken.</p>
<p>Agriculture – intelligence sharing between the Gangmasters Licensing Authority (GLA) and HSE, leading to enforcement action where necessary (2009 – 2010)</p>	<p>Prompt and effective response to requests for information about those who apply to hold a gangmaster licence. Effective screening and referral by HSE single point of contact to the field and subsequent enforcement action taken.</p>
<p>Gender – integrate specific points from Fact Sheet 43 and TUC gender sensitivity checklist for occupational health and safety into topic inspection packs September 2009</p>	<p>Gender issues included in the content of new and existing topic inspection packs. Existing topic packs needing updating identified</p> <p>Packs updated</p>
<p>To require through early interventions that the Olympic Delivery Authority and the Principal Contractors have systems in place to check competence and provide appropriate health and safety induction for all workers (2009 onwards)</p>	<p>Design interventions to take account of different needs among particular groups of workers</p>

Action & Timing	Outcomes and Performance Measures
Partnership work on age	
To work with DWP age positive programme to develop key messages on health and safety and ageing	Employers aware of health and safety issues with age and what control measures can be put in place to enable older workers to continue at work. Guidance developed for employers on key actions that can be taken to make a difference to retaining and employing older workers.
Sustain our focus on communication	
Communications - Promotion and financial support given to HSE policy areas on most suitable communication channels and alternative formats (May 2009 Onwards)	Policy staff and Communications staff work together to establish most suitable communication mix for external and internal diverse audiences. Policy staff use EIAs to establish any special communication requirements for target audience and use the communications toolkit to consider the best way of communicating the message to the audience. Communications staff will determine the best way of communicating with the target audience (using EIAs as appropriate). This will include the provision of talking leaflets and the provision of material in alternative formats where necessary
Maximise effectiveness of campaigns, press, public relations, events and stakeholder engagement, by choosing images and text that will engage with the target audience (Ongoing)	Target audiences can fully access the health and safety messages directed at them.
Disability – examples of case studies from EHRC added to web / intranet pages (June 2009) Link to accessibility case studies on EHRC website (September 2009)	Practical guidance on reasonable adjustments in the workplace for people with disabilities available on HSE's website Guidance available for external stakeholders on accessibility of their premises – how to gauge accessibility and adjustments that can be made, where to go for advice etc
Communication of key Health messages to Young learners entering the workforce, via vocational training stakeholders (2009 onwards)	Ensure engagement with all key stakeholders. Update occupational health section of LSC Safe From Harm document
To further develop gender web pages (2009 onwards)	To promote gender specific messages about risks to health in the workplace. Work with TUC to promote the web pages by attendance at TUC GOSH meetings

Action & Timing	Outcomes and Performance Measures
<p>Develop web pages for new diversity strands (March 2010)</p> <p>To further develop disability web pages to include guidance on mental ill-health (March 2010)</p>	<p>Develop web pages for new diversity strands (March 2010)</p> <p>Identifying suitable stakeholder campaigns and gaining agreement to promote our guidance as part of their campaign. Communications plan to include how we will promote guidance using other channels.</p>
<p>Agriculture revisited: Communications campaign for Farming. Communications campaign focussing on older workers and parents. Aim to cut the number of deaths and injuries amongst target groups (2009 – 2011)</p>	<p>Effective advertising and direct mail campaign as determined by independent evaluation. Revised attendance at agricultural shows to reach target audience. Development of effective supporting collateral products</p>
<p>To make sure that information, advice and guidance is accessible to everyone. We will proactively produce core health and safety information in a range of alternative formats including Braille, Easy Read, English, Welsh, British Sign Language, large print and audio. Where necessary we will continue to proactively translate information into other languages. (June 2009)</p>	<p>A range of key health and safety publications will be available in a range of formats</p>
<p>Mechanisms in place to promote HSE's vision (May 2009 onwards)</p>	<p>Extensive communications plan developed and delivered; to raise awareness and benefits of diversity, equality impact assessment tool and equality legislation requirements</p>
<p>Communications - Intranet Develop and publicise new intranet pages on business benefits of diversity (Ongoing)</p>	<p>Pages developed with help of MAGNET. Pages publicised using e-Express and networks. Staff have an improved understanding of business benefits of diversity both for HSE and other employers. Heightened awareness will be gauged by the use of an intranet questionnaire before and after the launch of the pages</p>

Action & Timing	Outcomes and Performance Measures
Extend Diversity communications toolkit to include all diversity strands. (2009 Onwards)	To work with COI to explore the possibility of extending the HSE's 'Communicating with diverse audiences toolkit' to other diversity strands (gender, age, sexual orientation, religion or belief). Develop a useful insight into how this applies to HSE's stakeholders and provide sound practical advice to HSE's communications teams.
Major research projects on health	
Research – Agriculture and Food Sector Scoping study on respiratory disease in the bakery industry to include diversity issues of gender, age and race. (Dec 2009)	The main aim of the project is the identification of groups of bakery workers who are at risk of respiratory disease but will cover factors such as age, gender or race to explore if diversity issues influence risk levels. The conclusions of the research will be used to develop future interventions with the bakery industry to reduce exposure to flour dust
Research– Continuation of research to estimate the occupational cancer burden in the UK, including breast and prostate cancer. (Imperial College) (Early 2010)	Report to be produced to time and quality. Further actions identified from the report will be taken forward.
Following up of research on possible increased risk of certain cancers (breast, stomach, lung and brain) at a Scottish semiconductor plant (workforce includes many women) (Late 2009)	Report to be produced to time and quality. Further actions identified from the report will be taken forward.
Research into the risk of mesothelioma in females as well as males. (Early 2009)	Report to be produced to time and quality. Further actions identified from the report will be taken forward.
Ongoing series of population based surveys and other projects on the scale of work-related illness, injury and working conditions (Annually and ad hoc)	Report to be produced to time and quality. Further actions identified from the report will be taken forward.
Address issues in relation to correct face fit of RPE, particularly in relation to Female face size/shape and the need for other means of protecting bearded workers. (March 2010)	Research on behavioural aspects toward RPE resulting in a report for dissemination to HSE and stakeholders. Research on supply of RPE in the construction industry and development of a model simulation for face fit.

Action & Timing	Outcomes and Performance Measures
Stakeholder engagement	
<p>To join and attend the DWP Equality Scheme stakeholder group to build relationships with a range of stakeholders (2009 onwards)</p> <p>Set up a disabled stakeholder group (March 2010)</p> <p>Continue to work with the TUC Gender and Occupational Health and Safety (GOSH) group to progress the gender work stream (2009 onwards)</p>	<p>Greater awareness of HSE diversity priorities amongst stakeholders and promoting our priorities with DWP group.</p> <p>Improved understanding of stakeholder needs, by engaging with them on development of HSE's single equality scheme</p> <p>Disabled people involved in shaping HSE policy and services</p> <p>Key stakeholders with HSE to progress gender work, sharing experience and good practice.</p> <p>Regular communication between EDT and GOSH.</p>
<p>To encourage more involvement of women in health and safety decision making by working with others such as the TUC to persuade more women to volunteer to become safety representatives or representatives of employee safety.</p> <p>(June 2009)</p>	<p>Canvass ideas and explore opportunities with TUs in relation to addressing the challenge of recruiting more female safety representatives, to enable us to determine if an intervention is required.</p>
<p>Construction – new outreach workers to be introduced alongside inspectors to increase links with vulnerable communities. This will include fluent speakers in identified languages of migrant workers in this area. Linking faith to communities, FE college, Trade Union and immigrant community organisations</p> <p>(2009 – 2010)</p>	<p>Outreach workers to be in place and links with faith communities, FE colleges, immigrant community organisations to be established.</p> <p>Interaction with targeted communities to have commenced in line with and established action plan.</p>

HSE'S VISION

Our mission is to prevent death, injury and ill-health to those at work and those affected by work activities in Great Britain. For this to become a reality, we need to work with employers, workers and other stakeholders to help them understand their role and responsibilities. By all working together towards a set of common goals, we should bring about improvements in health and safety performance.

To be successful in this we need to understand the diverse society in which we operate; be clear about the impact of our policies and operations on that diverse society; and conduct our business with sensitivity and respect for people's different needs and perspectives on life.

We will reach out to employers, workers and other stakeholders using appropriate channels of communication. We will work with them, to help them understand people's different needs and develop appropriate health and safety protective measures; and so promote healthy and safe workplaces for all.

HSE will do this best if we are able to relate to that diverse society. Encouraging diversity in recruitment and valuing the diversity we have amongst our own staff is key to our success and effectiveness. We want to be a fair and inclusive organisation, respecting what each person brings to our business and recognising the value they add.