



# NIHR Imperial Biomedical Research Centre and Clinical Research Facility Equality, Diversity and Inclusion Strategy 2023–2027

Schedule of updates	
April 2023	Version 1
July 2023	Version 2

This strategy details our vision, objectives, approach, and goals for equality, diversity, and inclusion (EDI) at the NIHR Imperial Biomedical Research Centre and Clinical Research Facility for 2023-2027. This strategy is a live document, and it will be revised and updated for 2025-2027 to reflect our progress and our evolving EDI maturity level.

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## **Abbreviations**

AHSC: Academic Health Science Centre

**BRC: Biomedical Research Centre** 

CATO: Clinical Academic Training Office

CC4C: Connecting Care for Children

CRF: Clinical Research Facility

CRN: Clinical Research Network

EDI: Equality, Diversity, and Inclusion

FTE: Full-time Equivalent

HPAG: Healthcare Professionals Academic Group

**HR: Human Resources** 

ICL: Imperial College London

ICHNT: Imperial College Healthcare NHS Trust

ICS: integrated care system

IHKB: Imperial Health Knowledge Bank

IMD: Index of Multiple Deprivation

LGBTQ+: Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, and more

NIHR: National Institute for Health and Care Research

NMAHPP: nursing, midwifery, Allied health professions, Healthcare Scientists, Psychology, Pharmacy

**NWL: North-West London** 

PERC: Patient Experience Research Centre

PIEP: Public Involvement, Engagement and Participation

PRB: Protocol Review Boards

WSIC: Whole Systems Integrated Care

## **Definitions**

**Biomedical Research Centre:** collaborations between world-leading universities and NHS organisations that bring together academics and clinicians to translate lab-based scientific breakthroughs into potential new treatments, diagnostics and medical technologies.

Clinical Research Facility: purpose-built facilities in NHS hospitals where researchers can deliver studies. CRFs support the delivery of early translational and experimental medicine research, from studies testing new treatments in patients for the very first time (first-in-human trials) through to early safety and efficacy trials (Phase IIa trials). They provide dedicated purpose-built facilities and expertise for the delivery of high-intensity studies funded by the NIHR, the life sciences industry and other organisations.

**Equality:** ensuring that everyone is given equal access to resources and opportunities to use their skills and talents. Taking a systems approach to what we do and how we do it and identifying and removing long standing, structural barriers to success.

**Diversity:** being reflective of the wider community. Having a diverse community, with people from a broad range of backgrounds represented in all areas and at all levels.

**Inclusion:** an approach where groups or individuals with different backgrounds are welcomed, culturally and socially accepted, and treated equally. Engaging with each person as an individual. A sense of belonging that is respectful of people for who they are.

## Introduction

Embracing equality, diversity and inclusion (EDI) is not simply a matter of complying with the law. Diversity is essential to excellence in scientific endeavour.

The NIHR Imperial Biomedical Research Centre (BRC) and the NIHR Imperial Clinical Research Facility (CRF) are both partnerships between Imperial College Healthcare NHS Trust (ICHNT) and Imperial College London (ICL). The BRC and CRF work closely together and with other local NIHR infrastructure. They are led and delivered by employees of both ICHNT and ICL, who are bound by the respective policies and guidance of their employing organisation. Specifically, the BRC and CRF will adhere to the principles and aims of both organisations' policies<sup>1,2</sup> with respect to EDI as well as incorporating NIHR approaches<sup>3</sup> and aligning with the BRC EDI Framework<sup>4</sup>. Our vision and objectives are built on and in line with the NIHR's EDI Strategy for 2022-2027<sup>3</sup>.

#### **Commitment Statement**

Our commitment to EDI recognises the fact that excellence comes through facilitating inclusive opportunities that bring together people with different experiences and backgrounds. Therefore, improving diversity will ultimately increase the quality, translational relevance and world-changing impact of our research. Now is the time to implement real and practical changes in the way we work and what our expectations are moving forward. This is imperative for both our staff and the researchers we fund, but also for the wider community we serve by taking steps towards better representation of the people of North West London.

This strategy sets out our vision, aims and objectives to create a fair, just and equal culture across the NIHR Imperial BRC and CRF over the next five years. It is the application of those more general institutional-level policies to the specific circumstances of the BRC and CRF. While there is a clear role for senior leadership in delivery of this strategy, we need to shape a culture in which every member of staff is able to influence change, has a voice that is heard, and is given the tools and knowledge to help them also lead on EDI. The BRC and CRF will work with staff across ICHNT and ICL to ensure fair treatment and opportunity for all, eradicating prejudice and discrimination based on an individual's or group of individual's protected characteristics. We are committed to ensuring EDI across all that we do, particularly access to research opportunities for staff and the population we serve.

The Equality Act 2010 covers nine protected characteristics, which cannot be used as a reason to treat people unfairly. Every person has one or more of the protected characteristics, so the Act therefore protects everyone. The protected characteristics are:

- age
- disability
- gender reassignment
- marriage or civil partnership
- pregnancy and maternity
- race
- · religion or belief
- sex
- sexual orientation

NIHR are also concerned about imbalances and inequalities associated with:

- geographical location
- socioeconomic status
- access to health or social care

It is important to us that we move beyond just complying with our duties, that we are proactive and continually striving to improve. To successfully embed our strategy, it is important that we demonstrate that we are monitoring and measuring the improvements we are making. We will share updates at regular intervals and look forward to celebrating the progress we are making.

#### Our FDI Framework

To undertake world-class translational research, we need to consider the people we support and the communities we serve. To ensure we do so systematically, the BRC created an EDI Framework to provide guidance and set the tone moving forwards.

The BRC EDI Framework<sup>4</sup> embraces the policies set out by both ICHNT and ICL, as our research and researchers are also linked to these organisations. The Framework sets out 5 Underpinning Principles that should apply to all EDI objectives within the remit of the BRC. These will also be adopted by CRF. They should be borne in mind when developing action plans or implementing specific activities.

#### **Underpinning Principles**

- 1. Measurable: we will take an evidence-based approach in identifying issues or challenges in EDI within the BRC and CRF, how these might be changed, and whether certain actions have worked. Objectives and plans need to be SMART (Specific, Measurable, Attainable, Relevant, Time-based). Regular review points will be scheduled to assess ongoing success (or otherwise) of a particular action, as well as regular collection of relevant data to monitor progress.
- 2. **Informed:** to properly address any issues, it is important to fully understand what these are before taking a particular route to a solution. As is encompassed in many of the actions undertaken by ICHNT and ICL, issues need to be identified that are specific to each protected characteristic to support activities and policy development.
- 3. **Equitable**: all activities should seek to be of equitable access. Barriers to engaging in an activity should be identified quickly in advance and addressed proactively. This includes more obvious examples, such as disability provision at a key event location, but also activities where barriers may be more subtle, e.g. equal representation of different ethnic groups and other demographics in a clinical trial.
- 4. **Proactive:** it is important to act proactively to address barriers to equality. Those with leadership and management positions in the BRC and CRF, as well as those funded by the programmes, should actively seek ways to change current practice and culture where this is

- required. The BRC and CRF Executives will consider all suggestions seriously and, in turn, BRC and CRF leadership will seek to become more representative of the wider community.
- 5. **Reflective**: it is also important to reflect on both current policies in ICHNT and ICL, and recent actions within the BRC and CRF, to understand where changes may be required. Whilst related to the principle of measurable change, reflectivity is a more holistic way to assess progress and should be carried out periodically. It is also, however, a principle that should be embedded within specific initiatives to ensure they meet the objectives set out for not just the activity itself, but for the broader strategy.

### Our Vision

We want the BRC and CRF to be an inclusive and diverse scientific research community.

Having a diverse workforce and inclusive culture will help us in our mission to protect and promote the interests of patients and the public in health and social care research.

# **Overall Objectives**

Our ideal future is one where the consideration and addressing of EDI have become second nature to all members of the extended NIHR Imperial BRC and CRF communities.

The six principal long-term objectives of our strategy are:

- To improve and diversify our recruitment and retention practices to develop a more balanced workplace, including diversity of senior leadership, governance, and decision-making positions within the BRC and CRF.
- 2. To build diverse leadership capacity by creating equitable opportunities for current and future leaders.
- 3. Signpost to existing mentoring schemes and create and support new schemes that are of strategic importance to the BRC and CRF.
- 4. Signpost to existing networks and create and support new networks that are of strategic importance to the BRC and CRF.
- 5. To advocate for a more equal, diverse and inclusive future within the BRC and CRF and beyond and play an active part in constructive challenge.
- 6. Aim to ensure that the public we serve locally and nationally is reflected in the clinical and biomedical research we undertake through public involvement, engagement and participation in our research.

# Overall Approach

Achieving the step-change required for a more inclusive and diverse NIHR will require the collaboration and energies of everyone across the NIHR.

A successful long-term approach will include:

- Developing a robust evidence base to better understand barriers in our systems and biases in our processes that result in the under-representation of some communities in our research, including young people, people from ethnic minority groups and disabled people.
- Championing inclusivity, redesigning our processes, introducing targeted initiatives and effectively monitoring and evaluating impact.
- Dedicating resources to the systematic tracking, reporting and evaluation of EDI within the BRC and CRF, including data on our workforce and the constitution of our committees, and the people who shape and participate in our research studies.
- Work together internally, within the BRC and CRF, and with external organisations (e.g. other universities, funders, international bodies, and EDI experts) to learn, develop and share best practice.

A successful EDI outcome for the BRC and CRF will be one where:

- EDI is embedded in our systems, culture and processes.
- Our research workforce and our Public Involvement and Engagement and Participation (PIEP)
   contributors are considerably more diverse.
- Access to, involvement and participation in health and social care research is far wider.
- Everyone in the BRC and CRF communities visibly contributes to the ongoing delivery of the strategy.
- We collaborate internally and externally to develop good practice.

## Implementation

While the Framework offers guidance and direction, the Implementation Plan covers the practical actions for which we will be held accountable. Each activity will have an 'Owner' but ultimately many of the activities will be a team effort.

Our Implementation Plan lays out the steps we'll take to develop an equal, diverse and inclusive research community in North West London. We will monitor, evaluate and review evidence to measure progress against the plan. This mechanism will enable transparency and accountability.

Objective 1: To improve and diversify our recruitment and retention practices to develop a more balanced workplace, including diversity of senior leadership, governance, and decision-making positions within the BRC and CRF.

#### **Key areas of focus**

- 1) Increase diversity of recruitment panels at all stages of selection, including PPIE contributors.
- 2) Increase overall provision of mental health support mental health first aiders and training.
- 3) Promote innovative ways to encourage greater diversity in BRC/CRF staff at the application stage and throughout the hiring process.
- 4) Provide support and mentoring for researchers/staff from diverse backgrounds to ensure that they are retained and working in the BRC and CRF.
- 5) Achieve diversity across our governance, advisory and leadership structures, making sure decisions are made in an inclusive way.

Objective 2: To build diverse leadership capacity by creating equitable opportunities for current and future leaders.

#### **Key areas of focus**

- 1) Provide packages of support and specific training for potential future leaders in areas identified as common barriers and incorporating ways to nurture diverse talent.
- 2) Raise awareness of discrimination through training and development courses available, with specific training in EDI principles.
- 3) Specialised training for NMAHPP in identified areas requiring support.

Objective 3: Signpost to existing mentoring schemes and create and support new schemes that are of strategic importance to the BRC and CRF.

#### **Key areas of focus**

1) The BRC and CRF will play an active role in facilitating and enabling reverse mentoring activities.

Objective 4: Signpost to existing networks and create and support new networks that are of strategic importance to the BRC and CRF.

#### Key areas of focus

1) A dedicated web space will be created to serve as a hub for finding supportive networks for people underrepresented in science and medicine in ICHNT and ICL.

Objective 5: To advocate for a more equal, diverse and inclusive future within the BRC and CRF and beyond and play an active part in constructive challenge.

#### Key areas of focus

- Identify EDI Champions to sit on each Theme Committee and in the BRC and CRF Executives, with a dedicated remit.
- 2) Explain EDI strategy clearly and keep it open to continuous improvement.
- 3) Create a culture of constructive challenge, up to and including questioning ICHNT/ICL/NIHR policies where they are not within the ethos of EDI.

Objective 6: Aim to ensure that the public we serve locally and nationally is reflected in the clinical and biomedical research we undertake through public involvement, engagement and participation (PIEP) in our research.

#### **Key areas of focus**

- Ensure diversity within members of the public sitting on governance committees is representative of the local population.
- 2) Proactive challenge of clinical trial recruitment to ensure representation from across the community.
- 3) Ensure that all PIEP activities are inclusive and accessible.

- 4) Undertaking / funding research of highest quality that is relevant to, and where appropriate involves, a diverse population of research participants
- 5) Undertaking / funding research of highest quality that, where relevant, has considered health inequalities
- 6) Understand full diversity data for all those involved in our involvement, engagement and research activities
- 7) Be transparent about diversity data to identify and address issues

The first step in successful EDI data collection and analysis is ensuring the impact of collecting this data are understood and that our public contributors are involved in the process. For some of the public and for certain communities collecting data on protected characteristics like pregnancy, religion or belief and sexual orientation may negatively impact involvement and research participation. As such, before we begin to expand the range of protected characteristics on which we collect data from potential public contributors and research participants, we plan to carry out a consultation with our BRC public contributors and conduct further research. This approach has been supported by feedback from our BRC EDI public contributor.

# Roles and responsibilities

All staff have a responsibility within the strategy for ensuring we achieve our EDI ambitions.

We all have a responsibility for ensuring that we role model our values in the way we work and interact with our patients, the public and our colleagues. We want all those involved in the leadership and management of people to be visible, fair, inclusive and to exhibit behaviours that reflect our values. We will support staff to lead in a way that promotes equality, values diversity, and embeds inclusion. To achieve this, we will provide tools and resources to enable our staff and leaders to feel informed, confident and skilled in promoting fairness and inclusion. We will also celebrate good practice against these qualities and hold to account those who do not demonstrate these values and behaviours.

#### Governance

The BRC and CRF Executives will have a clear, agreed and effective approach to supporting EDI throughout the BRC and CRF and in their own practice. This approach supports good governance and the delivery of the BRC and CRF's joint EDI strategy.

This strategy will be periodically reviewed by the BRC and CRF EDI oversight committees. The committees will meet separately at least 6 monthly and jointly annually to discuss and oversee the following:

- 1. Recruitment, hiring, and retention practices.
- 2. Community engagement practices.
- 3. Research participation practices.

The BRC committee will be chaired by a nominated Academic Lead for EDI and will consist of 4-6 Theme leads or their representatives (e.g. EDI Champion) and a PIEP contributor. The CRF committee will include the CRF Senior Management team, PIEP Manager, Recruitment Manager and EDI Champion.

The committees will design and provide suggestions and best practices for improving EDI recruitment, hiring and engagement practices; and create and review EDI metrics of success. BRC Theme leads will be responsible for monitoring EDI metrics within their Themes and reporting progress to the EDI oversight committee. The BRC's Academic Lead for EDI will report to the BRC Executive. The CRF's Lead for EDI will report to the CRF Executive. In addition, EDI will be a standing agenda item for discussion at the CRF's monthly management meeting.

The BRC EDI oversight committee will aim to publish an EDI report as part of the annual reporting period during year 3 of the award (Financial Year: 2024/2025). The CRF EDI oversight committee will aim to provide annual reports to NIHR from year 2. These reports will examine progress on equalities targets, review the inequalities which persist, and demonstrate our commitment to overcoming these challenges. The reports will include workforce, research participation and public involvement reviews which outline the makeup of our workforce, research participants and public contributors by ethnicity, age, disability and gender. They will also show how our workforce are represented across different job families and grades, and how our research participants and public contributors represent populations across geographical location and all levels of deprivation.

## Measuring Progress

To successfully embed our strategy, it is important that we demonstrate that we are monitoring and measuring the improvements we are making. We will publish our progress against a core set of EDI metrics to ensure visibility for patients, the public and our staff.

To make sure we are making progress on EDI, we need to have the right approach to track progress and to shift our approach when needed. To do this, we will:

- Identify and monitor a focused set of metrics to reflect the shifts we're making.
- Assess the effectiveness of policies and practices against these metrics.
- Implement clear governance and accountability for this strategy at all levels of the BRC and CRF.
- Publish a BRC EDI Data Report during year 3 and an annual CRF EDI Data Report from year 2.

#### Key Metrics We Will Track

We will initially track key indicators across our six strategic objectives to understand the progress we are making against our aims. We will also aim to collect new data where it currently does not exist. For these areas we will be setting targets once the data and processes are in place. The key outcomes we hope to achieve are summarised in the Table below.

Objective 1: To improve and diversify our recruitment and retention practices to develop a more balanced workplace, including diversity of senior leadership, governance, and decision-making positions within the BRC and CRF.

Intended Outcome	Actions	Owner	Key Metric(s) BRC	Key Metric(s) CRF
Increase diversity of	BRC & CRF	BRC Theme	Collect data to monitor age,	Collect data to monitor age,
recruitment panels at	Engage with, and learn from,	leads / BRC	gender, sexual orientation,	gender, disability, sexual
all stages of selection,	underrepresented groups from our more	Office	disability and ethnicity of	orientation and ethnicity of
including PPIE	established senior researchers/staff to		applicants and appointments to	applicants and appointments to
contributors.	increase appointments to our	CRF Leads /	our recruitment panels from mid-	our recruitment panels from mid-
	recruitment panels from ethnic minority	CRF	2023.	2023.
	and female applicants.	Operations		
		Team	Increase diversity within staff	Increase diversity within staff
	Survey applicants to our recruitment		sitting on our recruitment panels	sitting on our recruitment panels
	panels about their personal		from mid-2023 baseline, by start	from 2023 baseline, by start of
	characteristics (including age, gender,		of 2027, if baseline data is not	2027, if baseline data is not
	sexual orientation, disability, and		representative of the population.	representative of the population.
	ethnicity).			
Increase overall	BRC & CRF	BRC Theme	At least one designated qualified	At least one designated qualified
provision of mental	Theme leads requested to find at least	leads	mental health first aider in each	mental health first aider in the
health support –	one individual in their theme to undergo		BRC Theme by start of 2024.	CRF by start of 2024.
mental health first	the College's Mental Health First Aid	CRF Leads /		
aiders and training.	training	CRF		Appointment of a Wellbeing
		Operations		Champion by start of 2024 to
		Team		create a programme of
				events/activities to support
				wellbeing.
Promote innovative	BRC & CRF	BRC Theme	Collect data to monitor age,	Collect data to monitor age,
ways to encourage	Engage with, and learn from,	leads / BRC	gender, sexual orientation,	gender, sexual orientation,
greater diversity at the	underrepresented groups in our	Office	disability and ethnicity of	disability and ethnicity of
application stage and	research community and external		applicants to positions within the	applicants to positions within the
throughout the hiring	experts to improve recruitment and	CRF Leads /	BRC from mid-2023.	CRF from mid-2023.
process	funding approaches, to understand and	CRF		
	remove barriers and to tackle racial bias.	Operations	Work towards equal success rates	Work towards equal success
		Team	to positions within the BRC for	rates to positions within the CRF
	ICHNT staff EDI data to be collected via		researchers and staff, regardless	for staff, regardless of age,
	MyESR/Qlikview.		of age, gender, sexual orientation,	gender, sexual orientation,
			disability or ethnicity by start of	disability or ethnicity <b>by start of</b>
			2027.	2027.

	Collect data on age, gender, sexual orientation, disability and ethnicity for		Ensure 100% staff involved in staff	Ensure 100% staff involved in
	all staff recruitment processes, including		recruitment process have	staff recruitment process have
	for all shortlisted candidates,		undergone Unconscious Bias	undergone Unconscious Bias
	interviewees and those recruited.		training, by start of 2024.	training, by start of 2024
	Ensure all senior staff/line managers		Collect data to monitor age,	
	attend EDI training eg. Unconscious Bias.		gender, sexual orientation,	
			disability and ethnicity of BRC	
	BRC Specific		grant applicants and holders from	
	Engage with, and learn from,		mid-2023.	
	underrepresented groups in our			
	research community to increase		Increase diversity within BRC	
	applications from Black and ethnic		grant applicants from mid-2023	
	minority and female applicants,		baseline, by start of 2027, if	
	specifically to BRC grants aimed at more established, senior researchers.		baseline data is not representative of the population.	
	established, selliol researchers.		representative of the population.	
	Embed EDI in our researcher			
	communications to ensure our content			
	is inclusive and accessible.			
	Champion the work of researchers from			
	diverse backgrounds in our researcher			
	communications.			
Provide support and	BRC & CRF	BRC Theme	Evidence of signposting	Evidence of signposting staff
mentoring for	Help build, or signpost to support	leads / BRC	researchers/staff from diverse	from diverse backgrounds to
researchers/staff from	networks for women, ethnic minority	Office	backgrounds to networks	networks supporting
diverse backgrounds to	and neurodiverse or disabled	CD5 1 1 /	supporting underrepresented	underrepresented groups.
ensure that they are	researchers/staff to connect those who	CRF Leads /	groups.	
retained and working in the BRC and CRF	have similar experiences and find	CRF Operations		
III UIE DNC dIIU CKF	potential mentors.	Team		
	Survey staff about their personal	Team	Collect data annually to monitor	Collect data <b>annually</b> to monitor
	characteristics (including age, gender,		age, gender, sexual orientation,	age, gender, sexual orientation,
	disability, sexual orientation, and		disability and ethnicity of	disability and ethnicity of staff
	ethnicity).		researchers/staff within the BRC	within the CRF <b>from mid-2023</b> .
			from mid-2023.	

#### **BRC Specific**

Implement next destination career tracking for BRC researchers and PhD students to understand career pipeline by diversity data.

Continue to identify and help remove barriers that female researchers face staying in biomedical research and progressing to senior positions, including by promoting flexible research career policies and providing support through our Springboard Women's Development Programme and Women in Academic Medicine network.

Provide dedicated career support initiatives to researchers from ethnic minority backgrounds and those who identify as neurodiverse or disabled including mentoring and leadership through our IMPACT Development Programme and Calibre leadership programme, respectively.

#### **CRF Specific**

Promote the CRF across the College and Trust to approach PIs that are not already using the CRF ensuring a wider reach. Including presentations to speciality research forums.

Increase diversity within researchers/staff working in BRC from mid-2023 baseline, by start of 2027, if baseline data is not representative of the population.

Collect data to monitor destination career by age, gender, sexual orientation, ethnicity and disability for BRC researchers and PhD students from mid-2023.

Collect data to monitor number of female researchers who have undertaken the Springboard Women's Development Programme from mid-2023.

Collect data to monitor number of researchers from ethnic minority backgrounds who have undertaken the IMPACT Development Programme from mid-2023.

Collect data to monitor number of researchers who identify as neurodiverse or disabled who have undertaken the Calibre leadership programme from mid-2023.

Increase diversity within staff working in CRF from mid-2023 baseline, **by start of 2027**, if baseline data is not representative of the population.

Evidence of promotion of the CRF across the College and Trust annually.

Achieve diversity	BRC & CRF	Committee /	Theme Management Committees'	PRB panel and Management
across our governance,	EDI a rolling agenda item on all key	BRC Office /	meeting minutes and list of	Meeting minutes and list of
advisory and	decision-making committees.	BRC Theme	attendees retained in designated	attendees retained in designated
leadership structures,		Leads	electronic folders, from mid-2023.	electronic folders, from mid-
making sure decisions	BRC Specific			2023.
are made in an	Diverse representation on Theme	CRF EDI		
inclusive way	Management Committees, including a	Committee /		
	PPIE and EDI representative.	CRF		
		Operations		
	CRF Specific	Team / CRF		
	Diverse representation on the PRB panel	Leads		
	and Management Meeting including a			
	PPIE and EDI representative.			

Intended Outcome	Actions	Owner	Key Metric(s) BRC	Key Metric(s) CRF
Provide packages of support and specific training for potential future leaders in areas identified as common barriers and incorporating ways to nurture diverse talent	BRC Specific Promote and support researchers to attend the College's Springboard Women's Development Programme, IMPACT Development Programme and Calibre leadership programme for women, staff who identify from a minority ethnic group and staff who identify as neurodiverse or disabled, respectively.	BRC Theme leads / BRC Office	Increase year on year from 2023 to 2027 the percentage of more senior researchers from diverse backgrounds attending the College's Development Programmes (see above).	
Raise awareness of discrimination through training and development courses available, with specific training in EDI principles.	BRC & CRF Promote and support researchers/staff within the BRC and CRF to undertake, as a minimum, the following EDI online training, or equivalent:  • EDI at Imperial  • Unconscious Bias  • Harassment: confronting inappropriate behaviour	BRC Theme leads / BRC Office CRF Leads / CRF Operations Team	By mid-2023, collect data annually on the percentage of researchers/ staff within the BRC completing the following EDI online courses or equivalent:  • EDI at Imperial  • Unconscious Bias  • Harassment: confronting inappropriate behaviour	By mid-2023, collect data annually on the percentage of staff within the CRF completing the following EDI online courses or equivalent:  • EDI at Imperial  • Unconscious Bias  • Harassment: confronting inappropriate behaviour

			Ensure 100% researchers/ staff have undergone the EDI online courses above, by start of 2024.	Ensure 100% staff have undergone the EDI online courses above, by start of 2024.
Specialised training for NMAHPP in identified areas requiring support	BRC & CRF CATO will provide academic training for nurses, midwives, allied health professionals and medically-qualified staff across a wide range of areas linked to research.	BRC Theme leads / BRC Office CRF Leads / CRF Operations Team	By start of 2024, collect data annually on number of training courses offered by CATO to NMAHPP per year.  By start of 2024, collect data annually on number of NMAHPP attending training courses offered by CATO per year.	By start of 2024, collect data annually on number of NMAHPP attending training courses offered by CATO per year.  By start of 2024, collect data annually on number of NMAHPP attending training courses offered by CATO per year.

Objective 3: Signpost to existing mentoring schemes and create and support new schemes that are of strategic importance to the BRC and CRF					
Intended Outcome	Actions	Owner	Key Metric(s) BRC	Key Metric(s) CRF	
The BRC and CRF will play an active role in facilitating and enabling reverse	BRC & CRF Promote and support researchers/staff within the BRC and CRF, particularly BRC Theme Leads and BRC Executives	BRC Theme leads / BRC Office	At least one BRC Theme Lead or member of BRC Executive acting as a mentor on the Reverse Mentoring Schemes, by start of	At least one CRF Lead acting as a mentor on the Reverse Mentoring Schemes, by start of 2024.	
mentoring activities.	and CRF Leads, to take part in either ICL's or ICHNT's Reverse Mentoring Schemes.	CRF Leads / CRF Operations Team	2024.	3. 232 ··	

Objective 4: Signpost to existing networks and create and support new networks that are of strategic importance to the BRC and CRF					
Intended Outcome	Actions	Owner	Key Metric(s) BRC	Key Metric(s) CRF	
A dedicated web space	BRC & CRF	BRC Office	Live and regularly updated	Live and regularly updated	
will be created to serve	Set up and regularly update a		dedicated section on BRC website	dedicated section on CRF	
as a hub for finding	dedicated section on our websites to	CRF Operations	signposting to ICL and ICHNT staff	website signposting to ICL and	
supportive networks	serve as a hub for finding supportive	Team	networks, by start of 2024.	ICHNT staff networks, by start	
for people	networks for people			of 2024.	
underrepresented in					

science and medicine in	underrepresented in science and		
ICHNT and ICL.	medicine in ICL and ICHNT.		

Intended Outcome	Actions	Owner	Key Metric(s) BRC	Key Metric(s) CRF
Identify EDI	BRC & CRF	BRC Theme	One named EDI Champion within	One named EDI Champion
Champions to sit on	EDI Champion nominated for each BRC	leads / BRC	each BRC Theme, by mid-2023.	within the CRF, by mid-2023.
each Theme	Research Theme and the CRF who will	Office		
Committee and in the	report data on the EDI metrics to the BRC			
BRC and CRF	and CRF EDI oversight committees,	CRF Leads / CRF		
Executives, with a	respectively.	Operations		
dedicated remit		Team		
Explain EDI strategy	BRC & CRF	BRC EDI	Named BRC Academic Lead for EDI	CRF EDI oversight
clearly and keep it	Establishment of separate BRC and CRF	Committee /	by mid-2023.	committees' meeting
open to continuous	EDI oversight committees, chaired by	BRC Office		minutes and list of attendees
mprovement	nominated Leads for EDI.		BRC EDI oversight committees'	retained in designated
		CRF EDI	meeting minutes and list of	electronic folder, from mid-
		Committee /	attendees retained in designated	2023.
		CRF Operations	electronic folder, from mid-2023.	
		Team		
	EDI strategy to be written in plain English,		EDI strategy to be written in plain	EDI strategy to be written in
	discussed across various forums such as		English and added to the BRC	plain English and added to
	training days, and added to the BRC and		website by mid-2023.	the CRF website <b>by mid</b> -
	CRF websites.			2023.
			Revisions/updates to EDI strategy	
	Ensure that EDI information on the BRC		published on BRC website as	Revisions/updates to EDI
	and CRF websites is presented in a		required.	strategy published on CRF
	coherent and accessible manner and			website as required.
	encourage feedback by providing an		Annually, review the accessibility	
	email address for comments.		of the BRC website to ensure that it	Annually, review the
			meets accessibility and usability	accessibility of the CRF
	Make use of the NIHR guide to		standards in compliance with the	website to ensure that it
	creating inclusive language and		Public Sector Bodies (Websites and	meets accessibility and
	content⁵.		Mobile Applications) (No. 2)	usability standards in
			Accessibility Regulations 2018.	compliance with the Public
				Sector Bodies (Websites and

	EDI campaign. Tweeting participant testimonials from minority groups and adding these to our websites. Publish interviews with ethnically diverse PIs promoting research and work with the EDI groups within the AHSC, the CRN, the UKCRF Network and wider NIHR infrastructure to share resources. Filming will be undertaken to create new material to be used for recruitment and other activities, ensuring diversity within the images. The websites will be reviewed and revised to ensure that they meet accessibility and usability standards.  Communities have told us that having presentations from people who look like them about research and health is very influential. Researchers will be encouraged to undertake this kind of activity (PERC will assist with arranging).		To include i) review of simplicity of the content and the ability to zoom in on content, and ii) review the number of PDF documents, as these are not fully accessible to all screen reader software.  BRC website and Twitter feed will be reviewed 6-monthly for evidence of their EDI campaigns, including evidence of researcher, research participant and public contributor testimonials from minority groups.	Mobile Applications) (No. 2) Accessibility Regulations 2018. To include i) review of simplicity of the content and the ability to zoom in on content, and ii) review the number of PDF documents, as these are not fully accessible to all screen reader software.  CRF website and Twitter feed will be reviewed 6-monthly for evidence of their EDI campaigns, including evidence of researcher, research participant and public contributor testimonials from minority groups.
Create a culture of constructive challenge, up to and including questioning ICHNT/ICL/ NIHR policies where they are not within the ethos of EDI	BRC & CRF BRC and CRF EDI oversight committees to meet separately at least 6 monthly to discuss and oversee i) BRC Theme/CRF recruitment, hiring, and retention practices, ii) BRC Theme/CRF community engagement practices and iii) BRC Theme/CRF research participation practices.	BRC EDI Committee / BRC Office  CRF EDI Committee / CRF Office	BRC EDI oversight committees' meeting minutes retained in designated electronic folder, from mid-2023.  BRC Executives' meeting minutes retained in designated electronic folder, from mid-2023.	CRF EDI oversight committees' meeting minutes retained in designated electronic folder, from mid-2023.  CRF Executive meeting minutes retained in designated electronic folder, from mid-2023.

Standing EDI agenda item for BRC and	Revisions/updates to EDI strategy	Revisions/updates to EDI
CRF Executive meetings.	published on BRC website as	strategy published on CRF
	required.	website as required.

Objective 6: Aim to ensure that the public we serve locally and nationally is reflected in the clinical and biomedical research we undertake through public involvement, engagement and participation in our research

Intended Outcome	Actions	Owner	Key Metric(s) BRC	Key Metric(s) CRF
Ensure diversity	BRC & CRF	PERC / BRC	Collect data to monitor age,	Collect data to monitor age,
within members of	Develop systems to measure appropriate	Executive	gender, ethnicity, disability,	gender, ethnicity, disability,
the public sitting on	demographic and protected		geographical location and	geographical location and
governance	characteristics, with a view to ensuring	CRF PIEP	deprivation (IMD) of applicants and	deprivation (IMD) of
committees is	that individuals recruited to public	Manager / CRF	appointments of members of the	applicants and appointments
representative of the	involvement in research governance roles	Leads	public sitting on governance	of members of the public
local population.	reflect the local population.		committees across the BRC, from	sitting on governance
			mid-2023.	committees across the CRF,
	Survey applicants to our public			from mid-2023.
	involvement in research governance roles		Increase diversity within members	
	about their personal characteristics (age,		of the public sitting on governance	Increase diversity within
	ethnicity, gender, geographical location (to		committees across the BRC from	members of the public sitting
	derive Index of Multiple Deprivation (IMD))		mid-2023 baseline, by start of	on governance committees
	and disability data).		<b>2027</b> , if baseline data is not	across the CRF from mid-
			representative of the local	2023 baseline, by start of
	CRF Specific		population.	<b>2027</b> , if the baseline is not
	Expand the remit of the PIEP panel to			representative of the local
	provide guidance and facilitation for CRF			population.
	researchers to address elements of EDI			
	through involving more diverse voices in			
	PPIE activities. Signpost to REPAG			
	framework.			
Proactive challenge	BRC & CRF	PERC / BRC	Collect data to monitor age,	Collect data to monitor age,
of clinical trial	Develop systems to measure appropriate	Theme Leads /	gender, ethnicity, disability,	gender, ethnicity, disability,
recruitment to	demographic and protected	Principal	geographical location, and	geographical location, and
ensure	characteristics, with a view to ensuring	Investigators	deprivation (IMD) of research	deprivation (IMD) of research

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pation.

PERC will identify a group of Communer Partners with strong community link guide community outreach and engagement, the insights of which we feed into all our 14 BRC themes.  CRF Specific EDI champions will discuss EDI representation with researchers durn Protocol Review Boards (PRBs), prore by a question in the PRB application to ensure that researchers consider their study population will reflect the ethnicity of the known disease area local population (for healthy volunte studies).	ng npted form now e or the	community engagement and outreach activities, by end of 2023.	PRB meeting minutes retained in designated electronic folder, from mid-2023.
CRF will work with investigators to it innovative solutions for remote mor of patients in studies. The CRF will pededicated space to evaluate new technology in a clinical environment representative of the home and assist the translation of the technology to community setting.	itoring ovide st in		
Develop and integrate technology for remote monitoring of health in clinic studies. Building on the theme of crediscipline science to drive innovation Adoption of technology to identify a enrol patients that are representative the local community (e.g. using elections of technology).	al ss- nd e of		Evidence of a dedicated space to evaluate new technology in a clinical environment representative of the home by start of 2025.
CRF will build on initiatives taken du COVID 19, which fostered collaborat with the Hammersmith and Fulham	•		

	Council around care homes and schools.			Annual survey, from start of
	Children's studies will benefit from the			<b>2024</b> , documenting evidence
	West London Children's Healthcare			of our research teams'
	Alliance, a partnership between all			approaches and activities for
	paediatric providers in North West with			remote monitoring of
	strong links with ICHNT's Connecting Care			patients in studies.
	for Children (CC4C), an integrated care			
	model. CC4C has been instrumental in the			Development of a platform
	recruitment of children from ethnic			for participant and parent
	minority backgrounds to NIHR urgent			engagement in study design
	public health studies during COVID-19. The			and recruitment through the
	NWL Schools Research Network will create			NWL Schools Research
	a platform for participant and parent			Network from start of 2025.
	engagement in study design and			
	recruitment.			
				By start of 2025, collect data
	CRF will offer local GPs and community			annually on number of
	nurses the opportunity of research			research sessions per year
	sessions alongside CRF staff to raise			run for GPs and community
	awareness of current research, build			nurses.
	research collaborations and connections			
	into primary care and seek advice and help			By start of 2025, collect data
	with recruitment to studies from across			annually on number of GPs
	our ethnically and socially diverse			and community nurses who
	community.			have taken up the offer of
				research sessions.
	CRF will explore the possibility of satellite			
	clinics to enable screening for studies in			By start of 2025, explore
	the community and work with GPs, patient			options and make
	representatives and the local council to			recommendation on the
	enable the conduct of low-risk early phase			feasibility of establishing a
	clinical studies close to where patients live			satellite community research
	and evaluate the use remote data capture			clinic.
	and integrated patient records to follow			
	outcomes.			
Ensure that all PIEP	BRC & CRF	PERC / BRC	Use evaluation forms to obtain	Use evaluation forms to
activities are	Review our research events processes,	Theme Leads	feedback from staff and the public	obtain feedback from staff
	including Code of Conduct, to ensure they			and the public about each of

inclusive and accessible.	are inclusive, accessible and free from harassment. Ensure our events venues are accessible e.g. wheelchair access, hearing loops.	CRF PPIE Manager / CRF Leads	about each of our research events and activities held.  Evaluations demonstrate that events and activities are successful.  Based on feedback, improvements made to subsequent events and activities.	our research events and activities held.  Evaluations demonstrate that events and activities are successful.  Based on feedback, improvements made to subsequent events and
			Learnings are put together and reported.	Learnings are put together and reported.
Undertaking / funding research of highest quality that is relevant to, and where appropriate involves, a diverse population of research participants	BRC Specific Introduce question(s) on our application form that ask about the diversity of research participants and the research team, and how, if appropriate to the research question, the research team will try to involve a diverse population of research participants in their study.	BRC EDI Committee / BRC Theme Leads / PERC Research Associate in Research Participation	Add question(s) <b>by mid-2023</b> .	ани геропеч.
	When reviewing research protocols, Funding Panels will be expected to challenge, from an EDI perspective, the study design, including any recruitment approaches or inclusion/exclusion criteria that are too restrictive if not appropriate to the research question.		Evidence of panel discussions regarding EDI aspects of study proposals in BRC Funding Panel meeting minutes retained in designated electronic folder, from mid-2023.	
	Set up a project to explore and address any underrepresentation in new research studies or clinical trials we undertake or fund. PERC will look to appoint a research associate in years 2-3 of the BRC to lead on research investigating inequalities in participation focusing on		Appointment of Research Associate in Research Participation within PERC <b>by end of 2024</b> .	

	underrepresented/under-served communities.		
Undertaking / funding research of highest quality that, where relevant, has considered health inequalities	BRC Specific Introduce question(s) on our application form that ask about how the proposed research plans to address health inequalities. This will demonstrate how research teams have considered and acknowledged how their research addresses health inequalities.	BRC EDI Committee / BRC Theme Leads	Add question(s) by mid-2023.
	When reviewing research protocols, Funding Panels will be expected to challenge, from a health inequalities perspective, the study design, including any recruitment approaches or inclusion/exclusion criteria that are too restrictive if not appropriate to the research question.		Evidence of panel discussions regarding health inequalities aspects of study proposals in BRC Funding Panel meeting minutes retained in designated electronic folder, from mid-2023.

Understand full	BRC & CRF	BRC Theme	By end of 2023, research teams	By end of 2023, research
diversity data for all	Studies will recruit from a local ethnically	Leads / PERC	will routinely collect and share data	teams will routinely collect
those involved in our	and socially diverse population of 2.3M, as	Leads / TERC	with Theme EDI Champions to	and share data with EDI
involvement,	well as nationally when the BRC or CRF are	CRF Leads /	monitor age, ethnicity, gender,	Champion to monitor age,
engagement and	a hub for network collaborations. We will	CRF PIEP	geographical location, deprivation	ethnicity, gender,
research activities	use digital tools, such as Cerner (Power	Manager	(IMD) and disability of individuals	geographical location,
research activities	Trials) and our Whole Systems Integrated	ivialiagei	approached and recruited to our	deprivation (IMD) and
	Care (WSIC) database and use GP mailouts		research studies.	disability of research
	to identify patients for our research		research studies.	participants. To include
	studies, thus increasing the pool of		By end of 2023, PERC will collect	collection of EDI data on
	potential participants.		I =	Cerner to be automatically
	potential participants.		data to monitor age, ethnicity,	· ·
	BBC Chasifia		gender, geographical location,	transferred to CRF Manager,
	BRC Specific		deprivation (IMD) and disability of	and ethnicity to be requested
	We will work with the Digital Health		all members of the public	for CRF bookings from mid-
	Theme, PERC and the Imperial Health		participating in involvement and	2023.
	Knowledge Bank core facility to establish a		engagement activities within the BRC.	La cara de la caracita de districa
	system for monitoring research		BRC.	Increase diversity within
	participation by age, ethnicity, gender,		Ingresses diversity within these	those involved in our
	geographical location, deprivation and		Increase diversity within those	involvement, engagement,
	disability.		involved in our involvement,	and research activities from
			engagement, and research	end of 2023 baseline, <b>by mid-</b>
	CRF Specific		activities from end of 2023	<b>2027</b> , if baseline data is not
	We will collect data on age, ethnicity,		baseline, <b>by mid-2027</b> , if baseline	representative of the
	gender, geographical location, deprivation		data is not representative of the	population.
	and disability from research participants to		local population.	
	provide baselines. To include collection of			
	EDI data on Cerner to be automatically			
	transferred to CRF Manager, and ethnicity			
	to be requested for CRF bookings.			
Be transparent about	BRC & CRF	BRC EDI	The BRC EDI oversight committee	The CRF EDI oversight
diversity data to	Publish anonymised, aggregated diversity	Committee /	will aim to publish an EDI report as	committee will provide EDI
identify and address	data, highlighting issues and key actions.	BRC Office	part of the annual reporting period	annual reports to NIHR <b>by</b>
issues			by the end of Year 3 of the award	the end of Year 2 of the
		CRF EDI	(Financial Year: 2024/2025).	award (Financial Year:
		Committee /		2023/2024).
		CRF Office	The EDI report will be made	
			publicly available on BRC website.	

	The EDI report and learnings will also be shared with all our staff via email.	EDI reports will be made publicly available on CRF website.
		The EDI report and learnings will also be shared with all CRF staff via email.

# References

- 1 Imperial College London EDI Strategy
- 2 Imperial College Healthcare NHS Trust EDI Strategy
- 3 NIHR Equality, Diversity and Inclusion Strategy 2022-2027
- 4 NIHR Imperial BRC <u>Equality</u>, <u>Diversity & Inclusion Framework</u>
- 5 NIHR A guide to creating inclusive content and language