NIHR | National Institute for Health and Care Research

NIHR Leicester Biomedical Research Centre and Clinical Research Facility

Equality, Diversity, and Inclusion Strategy

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This document explains our plans, aims, methods, and targets for making sure that everyone is treated fairly and equally, and that there is a diverse and inclusive environment at the Leicester NIHR Biomedical Research Centre (NIHR) and Clinical Research Facility (CRF) from 2022 to 2027. This plan is constantly being updated, and we'll make changes to it based on how well we're doing and how our understanding of inclusion has improved.

Glossary of Terms

BRC - Biomedical Research Centre

CAPN - Clinical Academic Practitioner Network

CCG – Clinical Commissioning Group

CRN - Clinical Research Network

CRF - Clinical Research Facility

CRP –-Clinical Research Practitioner

DART - Diet and Activity Research Translation

ECR - Early Career Researcher

EDI - Equality, Diversity, and Inclusion

EPSRC - Engineering and Physical Sciences Research Council

FTE - Full-time Equivalent

HDR-UK - Health Data Research UK

IAT - Integrated Academic Trainings

KPIs - Key Performance Indicators

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

LPT - Leicestershire Partnership Trust

LU - Loughborough University

MRC - Medical Research Council

NIHR - National Institute for Health, and Social Care Research

NMAHP-Nursing, Midwifery and Allied Health Professional

PSA - Professional Standards Authority

SMART - Specific, Measurable, Achievable, Relevant, Time-bound

TRC - Translational Research Collaboration

WTE - Whole Time Equivalent

UHL - University Hospitals of Leicester NHS Trust

UHN - University Hospitals of Northampton

UoL - University of Leicester R&I – Research and Innovation

WT-DTP - Wellcome Trust Doctoral Training Programme

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.

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.

Equality: Ensuring that everyone is given equal access to resources and opportunities to utilise 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.

Equality Act 2010: Is a law in the United Kingdom that ensures everyone is treated fairly and equally, regardless of their characteristics, that include their age, disability, sex, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation.

Equity: This means making sure everyone gets what they need to do their best. It's about being fair and just, and making sure people get what they deserve. This is different from equality, which means treating everyone the same. With equity, we understand that people start from different places and have different needs. So, we adjust the help and support they get based on what they need, to make things fairer, equitable and more equal in the end.

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

Intersectionality: A framework or approach that acknowledges that all people have unique experiences of discrimination and disadvantage exacerbated by the overlap of multiple social identities.

Under-served groups: The work of the NIHR-INCLUDE project shows that there is no single definition for an under-served group. Some key characteristics that are common to several under-served groups are:

- Lower inclusion in research than one would expect from population estimates
- High healthcare burden that is not matched by the volume of research designed for the group
- Important differences in how a group responds to or engages with healthcare interventions compared to other groups, with research neglecting to address these factors

The key idea here is that the definition of **'under-served'** is highly context-specific; it will depend on the population, the condition under study, the question being asked by research teams, and the intervention being tested. No single, simple definition can encompass all under-served groups.

Introduction

NIHR Leicester Biomedical Research Centre and Clinical Research Facility

The NIHR Leicester Biomedical Research Centre (BRC) is a partnership between the University of Leicester (UoL), University Hospitals of Leicester NHS Trust (UHL), Loughborough University (LU) and the University Hospitals of Northamptonshire NHS Group (UHN). It has been funded to continue doing important research in six areas:

1. **Cardiovascular disease**
2. **Respiratory and Infection**
3. **Lifestyle – including type 2 diabetes**
4. **Personalised cancer prevention and treatments**
5. **Environment and health**
6. **Using data to understand long term health conditions and health inequalities**

The NIHR Leicester Clinical Research Facility (CRF) provides support for early phase, experimental medicine studies from disease specialty clusters across the three sites of the University Hospitals of Leicester NHS Trust and Northampton General Hospital. This includes those early phase studies associated with the BRC disease themes of:

- Cancer,
- Cardiovascular,
- Lifestyle and Diabetes,
- Respiratory and Infection

but also includes studies in

- Children's Diseases,
- Renal Diseases,
- Acute Study platforms for in-patients.

Our central aims are to conduct groundbreaking and inclusive research, provide the right treatments to individuals for disease prevention and management, and use advanced facilities to efficiently carry out important studies on acute and long-term conditions

We also aim to collaborate with under-served groups, understand various factors affecting health, test hypotheses, improve diagnostics and treatments, and develop researchers.

By achieving these aims, we'll lead in researching various health conditions, collaborate with other research infrastructure, extend our impact through networks, and attract significant industry investment.

Commitment to Equality, Diversity, and Inclusion

We are fully committed to incorporating the best approaches and practice for equality, diversity, and inclusion across everything we do. We believe it's vital to identify and address ways to reduce inequalities and inequities and maximize inclusion in all areas. We've created shared goals for equality, diversity, and inclusion (EDI) that apply to both our Leicester NIHR Biomedical Research Centre (NIHR) and Clinical Research Facility (CRF). These strategic objectives include an overall Vision for inclusion, a Mission, and a Shared purpose in our commitment to EDI. We'll elaborate on these points here and provide a visual and text representation in Figure 1 on page 8.

Our vision is to:

Tackle disparities, reduce inequalities in results and experiences, and cultivate an all- encompassing, approachable, and considerate research atmosphere and ethos that empowers the flourishing of all individuals.

Our mission for EDI is to:

Promote equity and remove barriers to create inclusive research.

We aim to ensure everyone has a fair and equal opportunity to take part in research, regardless of who they are. We're committed to creating an inclusive research community that welcomes diversity and removes barriers, allowing everyone to contribute and thrive.

Our operating principle for inclusion:

Is at the core of our strategy, guiding our research, shaping our culture, and influencing our decision-making processes. We are dedicated to developing and implementing an inclusive approach that fosters inclusivity across all aspects of our practice, public involvement, and capacity development.

Central to our principle is our shared purpose and commitment to:

- **Increasing inclusivity in access to research opportunities, public involvement opportunities, research careers, and promoting diversity in research involvement.**
- **Offering public involvement opportunities that are accessible and reach people and groups according to research needs.**

Our central goal is to support a research environment that embraces inclusivity, encourages personal and professional growth, and facilitates the development of individuals from diverse backgrounds.

Furthermore, we are unwavering in our shared purpose and commitment to:

- **Collect and analyse diversity data for both our workforce and research participants.**

Using this data to guide us, we can learn more about and fix any unfair differences. This helps us make sure our plans treat everyone fairly and remove barriers, so that everyone can take part in research and succeed.

By following this principle of including everyone, we want to make a place where all people can join in, do well, and help with biomedical research, regardless of their background or identity.

a. Executive Summary

This strategy is focused on making things more equal and fairer, while also ensuring that everyone is included. We developed this strategy in line with NIHR's commitment to inclusion in health and social care research (NIHR Research Inclusion Strategy, 2022 - 27).

Following the NIHR Research Inclusion Strategy (2022 - 27), we understand and think about nine key areas (protected characteristics) that people might be treated unfairly for, like their sex, gender reassignment, or disability, as mentioned in the Equality Act 2010. We also pay attention to how different and additional factors, like socio-economic status and location or being part of multiple groups (intersectionality), can affect health and access to healthcare. We believe that it's important to go beyond just being equal and make sure our research equitable.

As part of our dedication to creating an inclusive BRC and CRF, we're actively working on our EDI strategy in alignment with the **Best Research for Best Health: The Next Chapter (2021)** and the **NIHR Research Inclusion Strategy (2022-27)**. For example, recent initiatives include:

Joint Statement of Commitment on EDI by the University of Leicester and University Hospitals of Leicester

We've agreed to work together to make sure that equality, diversity, and inclusion are important in everything we do. This partnership includes the University Hospitals of Leicester NHS Trust and the University of Leicester. Our goal is to fix any unfair differences, make things more equal, and create a welcoming atmosphere. This promise is for everyone we serve – staff, patients, and students of different backgrounds.

We actively take steps to reduce unfairness, such as:

- Helping women to take on leadership roles.
- Bringing in and keeping a diverse group of workers
- Talking to wider groups to figure out what we need to focus on and making changes in how we manage our employees.

We also give priority to treating people fairly no matter their race, sex, gender reassignment, disability, or LGBTQ+ status. We want everyone to feel included and valued. This promise helps us learn, improve health outcomes, and have leaders who include everyone. We watch how we're doing and use measurements to make sure we're doing things right.

We're not just stopping with this promise. We also want to extend and refresh this inclusive approach to other parts of our organization, including the University Hospitals of Northamptonshire NHS Group and Loughborough University.

Collation and Evaluation of Diversity

In accordance with the 'Evidence-led diversity and inclusion' theme of the NIHR's Equality, Diversity, and Inclusion strategy 2022-27, we have actively started collecting data on various protected characteristics, including age, disability, race and ethnicity, and sex on our workforce, research participants and public involvement.

Moreover, we have expanded beyond these protected characteristics, and will continue to adopt a core data collection approach for the BRC and CRF to collect data on all characteristics. To gather this data, we have adopted the NIHR approved Diversity Question Set and collaborated with our partners, University Hospitals of Northamptonshire NHS Group, Loughborough University, University Hospitals Leicester R&I Workforce, and University of Leicester staff.

This ongoing effort, together with our partners, is the base of our plan to be inclusive. We want to collect and organize information about lots of different characteristics in a systematic way, including things that are connected, like how people have unique experiences of discrimination and disadvantage and are exacerbated by the overlap of multiple social identities.

By doing this, we can keep track of how inclusive we're being across these different areas. This also helps us strengthen our partnership with our organizations and shows that we're all committed to inclusion. It's also helped us find gaps that need attention in our EDI strategy and action plan.

Figure 1: Joint BRC/CRF Strategic Priorities

VISION

Tackle disparities, reduce inequalities in results and experiences, and cultivate an all-encompassing, approachable, and considerate research atmosphere and ethos that empowers the flourishing of all individuals.

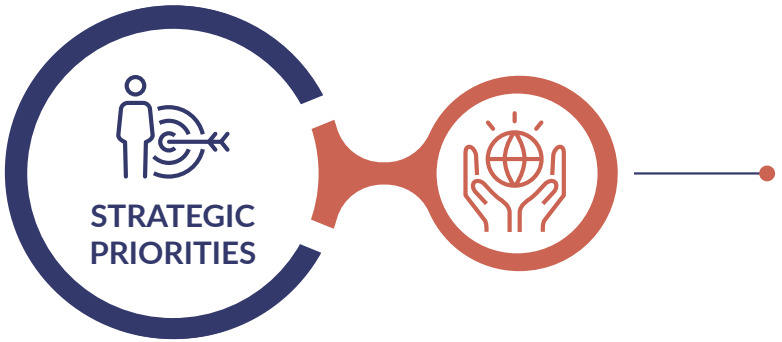
MISSION

Promote equity and remove barriers to create inclusive research.

SHARED PURPOSE

Commitment to:

- **Enhancing inclusive access to research, public involvement, and diverse research careers.**
- **Providing accessible public involvement opportunities aligned with research requirements.**
- **Analysing diversity data for our workforce and research participants to promote development.**



INCLUSION

(Long-term objectives)

- Fully develop and implement BRC and CRF EDI strategy: that permeates all aspects of our operations.
- Enhance the inclusivity of our research.
- Cultivate an EDI-sensitive workforce.
- Foster diversity within our workforce and continuously improve the cultural competency of our team members.
- Play an active role in informing and driving the national agenda for ethnic health research.

b. Governance and Resources

The BRC themes and CRF disease specialty clusters will implement EDI practices at the operational level to ensure the strategy is applied across research areas.

The collaborative BRC and CRF Inclusion platform (depicted in Figure 2) incorporates an academic function led by the Director of Research Inclusion, Dr. Natalie Darko, who divides her time between the roles (0.8 WTE for BRC; 0.2 WTE for CRF). Oversight will be managed by the Inclusion, Involvement, and Communication Strategy Group. EDI is embedded across roles as it's everyone's responsibility and includes both workforce development and participant reflection therefore, EDI is also part of training capacity and PPI roles.

The group's membership includes:

- BRC Director Prof. Melanie Davies,
- BRC Manager Dr. Aarti Parmar,
- CRF Director Prof. Nigel Brunskill,
- CRF Manager Tracy Kumar,
- Director of Training and Capacity Development Prof. Sally Singh,
- Director of Inclusion Dr. Natalie Darko.
- UHL Head of Research Communications Rachael Dowling
- UHL Director of Health Equality and Inclusion Dr. Ruw Abeyratne.

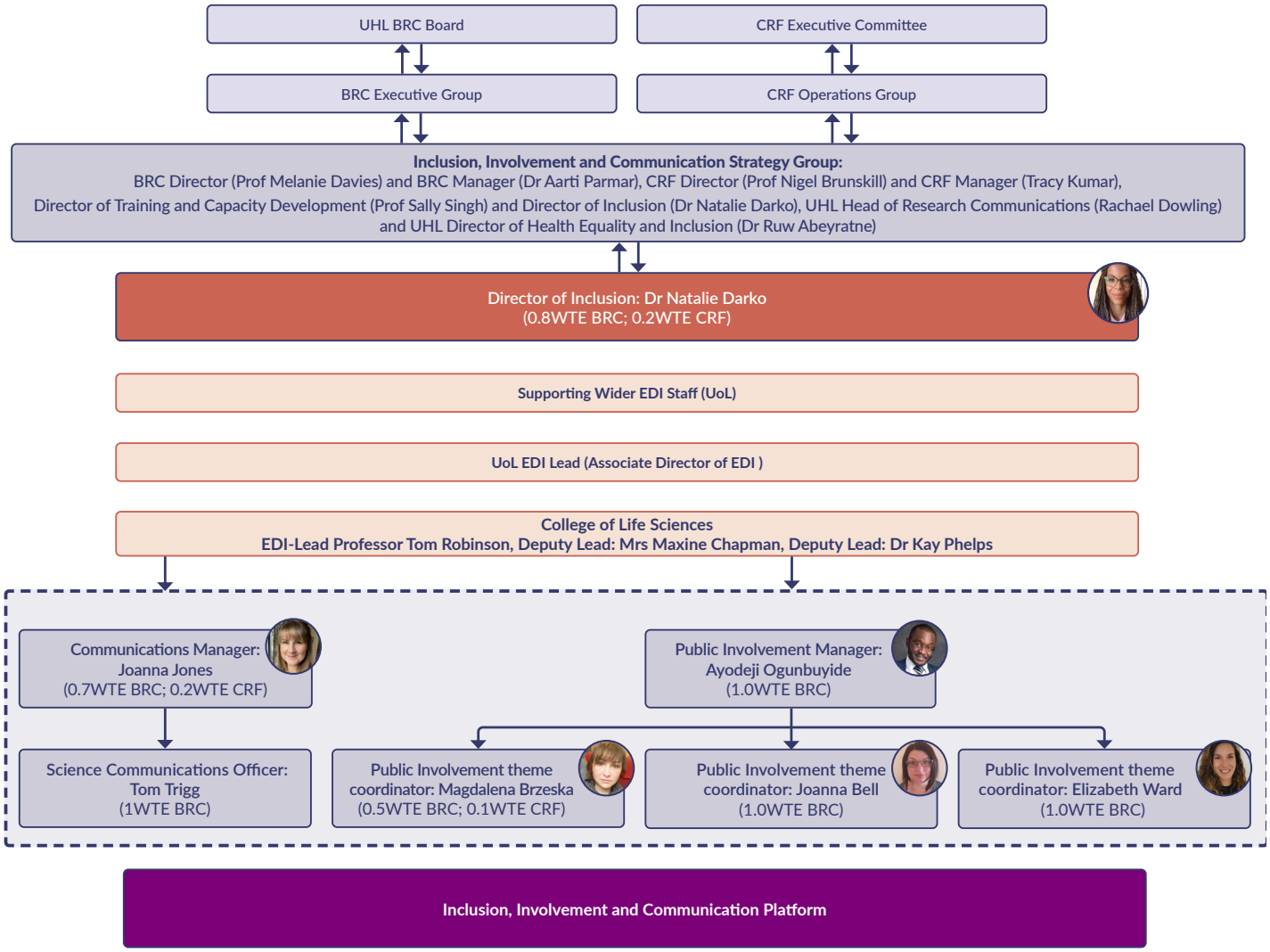
The group will convene quarterly to discuss and influence EDI efforts across both BRC and CRF research. Performance evaluation will rely on the EDI action plan aligned with each strategic objective, with reporting directed to the BRC and CRF Executive Groups.

Dr. Darko will receive substantial support for implementing these objectives from the newly established Training and Capacity Development Team (see Capacity Development Strategy), as well as the Informatics team. Additional guidance for implementation is available across the broader BRC/CRF infrastructure, which includes the University of Leicester Associate Director for EDI, Dr. Angie Pears, the College of Life Sciences EDI Lead, Professor Tom Robinson, and Co-Leads Dr. Kay Phelps and Mrs. Maxine Chapman.

The Inclusion Platform team is committed to producing an EDI Monitoring and Evaluation Report within the second year of the award as part of our annual reporting cycle. This report will assess our progress in addressing persistent inequalities and show our determination to overcome these challenges. The report will provide insights into the diversity of our workforce, research participants, and public involvement contributors across different characteristics. This information will be derived from the collection and evaluation of diversity data, and further elaborated below.

Furthermore, the report will illustrate how our workforce is distributed across various job roles and grades, and how our research participants and public contributors are representative of different groups. We will also detail the outcomes of EDI training programs for our staff and researchers, highlighting any changes in behaviour and improvements in reducing the under-representation of marginalized groups in our biomedical research activities.

Figure 2: Joint BRC/CRF Inclusion (EDI) Staff Structure



c. Objectives

The overall long-term objectives of both the BRC and CRF are rooted in maximising the impact on patient care and research delivery, emphasising equality, diversity, and inclusion (EDI). To address EDI/inclusion, together the BRC and CRF have defined five fundamental long-term objectives:

1. Fully develop and implement BRC and CRF EDI strategy: that permeates all aspects of our operations
2. Enhance the inclusivity of our research: to ensure that diverse perspectives and populations are represented and engaged.
3. Cultivate an EDI-sensitive workforce: by promoting awareness, understanding, and respectful practices throughout our staff and researchers.
4. Foster diversity within our workforce and continuously improve the cultural competency of our team members: to create an inclusive and supportive environment.
5. Play an active role in informing and driving the national agenda for ethnic health research: contributing to the advancement of knowledge and practices in biomedical research.

To achieve our goals, we've created an action plan below outlining significant ongoing and upcoming activities for the next 5 years. This plan primarily concentrates on our short, medium, and long-term goals. We'll provide updates as we make progressions on these actions and review the plan annually.

Joint EDI objectives & Action Plan

1. Fully develop and implement BRC and CRF EDI strategy: that permeates all aspects of our operations.			
	Internal Actions	**Owner**	**Key Metrics**
Short Term Objectives (1-2 years)			
• **Refresh the shared Statement of Commitment for EDI with partners**	**BRC & CRF** Engage with BRC and CRF partners and PPI contributors to revisit and update the Statement of Commitment.	Inclusion Platform Team and Director for Inclusion	Development of new Statement of Commitment for EDI, **by end of Year 1**. Complete an Annual Review of the Statement of Commitment from end of Year 2 to assess suitability.
• **Assess EDI Maturity**	**BRC & CRF** Continue to assess BRC and CRF maturity level utilizing existing EDI Maturity model and self-assessment exercise to inform and identify areas of strength and weakness in respect of delivering the EDI strategy. Distribute maturity self-assessment survey to Executive Board and BRC Theme Leads.	Inclusion Platform Team and Director for Inclusion	**By end of Year 2:** Complete self-assessment process with Executive Board and BRC Theme Leads. Identify areas for improvement and agree logical next steps and actions if needed.
• **Undertake a workforce diversity baseline exercise**	**BRC & CRF** Design and delivery of workforce benchmarking survey, and EDI monitoring survey utilizing NIHR Diversity Data Set.	Inclusion Platform, Team, Training and Capacity Development Team and Director for Inclusion	**By end of Year 2:** Complete the design of the workforce benchmarking survey and the EDI monitoring survey utilizing the NIHR Diversity Data Set. Complete analysis of survey results to identify trends, disparities, and areas requiring improvement for remainder of award.
• **Share our developing best practice across the UK CRF Network**	**CRF Specific** Develop Communications plan for sharing examples and cases of best practices across the UK CRF Network, with BRC and CRF Communications Manager and Scientific Communications Manager, CRF Manager, and BRC Theme leads.	Inclusion Platform Team, BRC and CRF communications Manager, BRC Theme leads, CRF Director and Manager	**By end of Year 2:** Establish a Communications Plan sharing exemplary cases and best practices within the UK CRF Network. During year focus will be on the execution of the Communications Plan. Regular updates, and presentations will be disseminated to the UK CRF Network, and provided in the BRC and CRF Hub highlighting the achievements and impact of our EDI efforts. Short Case studies of examples will be distributed.

1. Fully develop and implement BRC and CRF EDI strategy: that permeates all aspects of our operations.			
	Internal Actions	**Owner**	**Key Metrics**
Medium Term Objectives (2-3 years)			
• **Develop novel engagement strategies and PPI equality monitoring to increase the inclusivity of our research**	**BRC & CRF** Meet and engage with BRC Theme Leads, PPI team and public contributors to devise engagement strategies to improve access to research and outcomes for patients from under-served groups, particularly from Black ethnic minority groups and in the Cancer theme and CRF cancer cluster. Improve the equality monitoring and evaluation of our public involvement members by developing a monitoring system to measure appropriate demographic and protected characteristics, with a view to ensuring that individuals recruited to public involvement roles reflect groups underrepresented in BRC and CRF research. Update the PPI database to embed diversity set questions using the new PPI '**Get Involved Form**' and send an introductory email to the existing PPI contact list. Diversity set questions to be included in a separate linked anonymised survey form within the '**Get Involved Form**', that will survey applicants in our public involvement database about their personal characteristics (e.g age, ethnicity and disability data), utilising the NIHR Diversity question set.	Inclusion Platform Team, BRC Theme Leads, Director for Inclusion and Public Involvement Manager	**From end of Year 2**: Collect data to monitor key characteristics (e.g age, race, ethnicity, disability) of public involvement members across the BRC and CRF, adopting amended NIHR Diversity set questions. **By start of Year 3**: Increase diversity within public involvement members across the BRC and CRF from initial monitoring data collected, if data is not representative of diverse population.
• **Establish mechanisms for ongoing evaluation of EDI equality monitoring initiatives**	**BRC & CRF** Meet with and engage with Informatics team to develop systems, to support evaluation of EDI initiatives, and collection of EDI diversity data to inform Diversity and Inclusion Monitoring and Evaluation Reports.	Inclusion Platform Team, Informatics Team, Training and Capacity Team, and Director for Inclusion	**By the end of Year 2:** The Inclusion Platform team will provide EDI annual Inclusion Monitoring and Evaluation reports to NIHR. EDI reports will be made publicly available on BRC EDI Hub and BRC and CRF website. The EDI report and learnings will also be shared with the BRC Executive Board.

1. Fully develop and implement BRC and CRF EDI strategy: that permeates all aspects of our operations.			
	Internal Actions	**Owner**	**Key Metrics**
• **Provide researchers access to EDI strategy and culturally sensitive resources**	**BRC & CRF** Develop access to EDI strategy and resources for all staff and research via BRC Resource HUB, Document HUB, and EDI hub space and communicated via PPI team in interactions with BRC and CRF staff and researchers. Develop EDI Communication plan with BRC Communication Manager for EDI communications to explain and promote EDI strategy, support delivery of EDI updates, and signposting to RDS EDI Toolkit and culturally sensitive resources in Hub.	Inclusion Platform Team, Training and Capacity Development Team, and Director for Inclusion	**By the start of Year 3:** The Inclusion Platform team will upload the EDI strategy and supporting resources for all staff to the BRC Resource HUB, and Document HUB. **At the end of Year 2:** Director of Inclusion will meet with BRC Communication Manager, to devise EDI communications plan for remainder of award. PPI Manager will support Director of Inclusion to access feedback and guidance on communications plan from public members, and plan to be implemented during award.
Long Term Objectives (4-5 years)			
• **Evaluate impact of researchers access to EDI strategy and culturally sensitive resources**	**BRC & CRF** Complete monitoring and feedback survey to assess access to EDI strategy and evaluate impact of EDI strategy and culturally sensitive resources on inclusive practice.	Inclusion Platform Team, Director for Inclusion	**At start of Year 4:** Survey to be distributed to BRC staff to evaluate access and impact of EDI strategy and provision of EDI resources. Survey to be in BRC Resource HUB. Inclusion platform team will also meet with BRC theme leads and CRF Director and Manager to access feedback. The survey and meeting learnings will also be shared with the BRC Executive Board, and adjustments to action plan will be implemented.

2. Enhance the inclusivity of our research: to ensure that diverse perspectives and populations are represented and engaged.			
	Internal Actions	**Owner**	**Key Metrics**
Short Term Objectives (1-2 years)			
• **Incorporate routine collection key demographics into research studies**	**BRC Specific** Meet and work with Informatics Team to build an EDI monitoring form within BRC study REDCAP forms, to improve the equality monitoring and evaluation of our research participants, embedding the NIHR Diversity question set. For non-REDCAP forms, e.g qualitative studies, the form will be made available in the BRC Resource HUB, Document HUB, and EDI hub space. Meet and work with Research Network (CRN) to support development of EDI monitoring form within BRC study REDCAP study forms and qualitative studies and implement this tool within the local CRN's data collection processes.	Inclusion Platform Team, Informatics Team, and Director for Inclusion	**By the end of Year 2:** Distribute and launch the survey at BRC 2023 whole staff and research events and meetings. Complete annual survey, from start of year 2, documenting evidence of EDI monitoring from research studies, report to Executive board, and utilise data for annual report for Inclusion Monitoring and Evaluation reports to NIHR by the end of each year of the award.
Medium Term Objectives (2-3 years)			
• **Provide 'CRF in the Community' outreach service where the CRF team engage with study participants in the community to facilitate the participation of all individuals in clinical studies**	**CRF Specific** Develop '**CRF in the Community**' outreach service where the CRF team engage with study participants in the community to facilitate the participation of all individuals in clinical studies.	Inclusion Platform Team, PPI Team, and CRF Manager	**By end of Year 3:** Minimum of 4 outreach engagement service events will be delivered with study participants in communities across the BRC and CRF sites and communities, with participants from diverse groups and representing multiple diverse protected characteristics.
Long Term Objectives (4-5 years)			
• **Demonstrate successful implementation of equality monitoring and equality impact assessments for studies**	**BRC Specific** Provide access to training for staff and researchers on how to Complete Equality Impact Assessments across BRC research studies.	Inclusion Platform Team, Informatics Team, Training and Capacity Development Team, and Director for Inclusion	**By the start of Year 4:** Develop understanding of Equality Impact Assessments for BRC. **By the start of Year 5:** Embed Equality Impact Assessments for BRC studies.

3. Cultivate an EDI-sensitive workforce: by promoting awareness, understanding, and respectful practices throughout our staff and researchers			
	Actions	**Owner**	**Key Metrics**
Short Term Objectives (1-2 years)			
• **We will ensure that our BRC and CRF workforce take part once in the UHL active bystander program and research inclusion and cultural competency training (or equivalent at partner organisations)**	**BRC & CRF** Provide access to **Active Bystander** programme for all staff and researchers. Develop tailored and bespoke BRC and CRF Research Inclusion Training (including cultural competency) in collaboration with PPI team, public involvement members and BRC theme leads, and deliver training to staff and researchers.	Inclusion Platform Team, Informatics Team, Training and Capacity Development Team, BRC Theme Leads, and Director for Inclusion	**By the end of Year 1:** ensure that at least 50% of our BRC and CRF workforce take part once in the UHL Active Bystander Programme and Research Inclusion Training, or equivalent at partner organisations.
Long-Term Objectives (4-5 years)			
• **Develop an EDI-sensitive workforce and continue to improve the cultural competency of our workforce**	**BRC & CRF** Evaluate the impact of the **Active Bystander** programme and **Research Inclusion** training for all staff and researchers on inclusive practice, cultural competency, and overall EDI sensitivity.	Inclusion Platform Team, Training and Capacity Development Team, BRC Theme Leads and Director for Inclusion	**By the middle of Year 4:** qualitative focus- groups interviews and surveys delivered with sample of staff, researchers, research participants and PPI members to evaluate the usefulness and impact of two EDI programmes. **By the end of the Year 5:** 90% of our workforce will take part once in the **Active Bystander** programme and **Research Inclusion** training, or equivalent at partner organisations.

4. Foster diversity within our workforce and continuously improve the cultural competency of our team members: to create an inclusive and supportive environment.			
	Internal Actions	**Owner**	**Key Metrics**
Short Term Objectives (1-2 years)			
• **From baseline exercise, establish appropriate targets to increase diversity of our workforce and leadership positions**	**BRC & CRF** Develop a new **REDCAP** survey with **Informatics Platform** team to capture EDI monitoring and diversity data for all staff and researchers, embedding the NIHR Diversity question set. Include questions on completion of EDI and cultural competency training. Include branching questions for PhD students and Fellowship applicants and coordinate with Training and Capacity Team for input and collect information on themes, affiliation, roles, and completion of EDI training.	Inclusion Platform Team, Informatics Team, Training and Capacity Development Team, and Director for Inclusion	**By end of Year 2:** Distribute and launch the survey at BRC and CRF whole staff and research events and away days. Complete annual survey, from start of year 2, documenting evidence of EDI monitoring and diversity data for all staff, researchers PhD and fellows, and utilise data for annual report for Inclusion Monitoring and Evaluation reports to NIHR by the end of Year 2 of the award.
Medium Term Objectives (2-3 years)			
• **Increase the number of successful fellowship and PhD applications from under-served groups in the BRC**	**BRC Specific** To promote inclusion of under-served groups, review and assess the diversity of the fellowship and PhD candidates. Discussions will be held at Executive Boards (PRBs), to ensure that BRC Theme leads and researchers consider how recruitment methods can be more inclusive to candidates from under-served groups. Engage with, and learn from, under-served groups in our research community and internal (UoL Associate EDI Director and CLS EDI leads) and external experts to improve recruitment and funding approaches, to understand and address barriers.	Inclusion Platform Team, Training and Capacity Development Team, and Director for Inclusion	**From the middle of Year 1**: Collect data EDI monitoring and diversity data of fellowships and PhD applicants, see above Objective 4. **By end of Year 3:** Increase diversity of PhD and Fellowship candidates from mid-year 1 baseline, if the baseline is not representative of the diverse population and inclusive of under-served groups.

4. Foster diversity within our workforce and continuously improve the cultural competency of our team members: to create an inclusive and supportive environment.			
	Internal Actions	**Owner**	**Key Metrics**
• **Drive the UKCRF national agenda by engaging with the Networks core workforce development team and supporting Leicester CRF staff where possible into Network leadership roles**	**CRF Specific** Design full programme of events and deliver UKCRF 2024 National Conference, focusing on inclusion and EDI in access to clinical trials, hosted by Leicester CRF. Include opportunities for Education and Training, for CRF staff, Research Nurses & Practitioners, on EDI and cultural competency in public involvement, recruitment, trials, and communications. Provide support in applications for Network leadership roles, to strengthen careers for CRF staff from diverse groups.	Inclusion Platform Team, Training and Capacity Development Team, and Director for Inclusion	**By mid-point of Year 3:** Deliver UKCRF 2024 National Conference and provide opportunities for training. Distribute evaluation opportunities for UKCRF 2024 conference attendees to assess understanding on inclusion and EDI in access to clinical trials. **By end of Year 3:** Review evaluation data from conference and assess learning on improving EDI learning and cultural competency of staff. Identify and feedback learnings to CRF staff via Networks core workforce development and Communications team.
Long Term Objectives (4-5 years)			
• **Monitor progress towards these targets through regular assessments and reports, ensuring ongoing evaluation of our efforts**	**BRC & CRF** Review and assess staff EDI monitoring and diversity data from annual surveys and reports for all staff and researchers, to assess improvement in research inclusion and EDI learning.	Inclusion Platform Team, Informatics Team, Training and Capacity Development Team, BRC Theme Leads, and Director for Inclusion	**At the start of Year 4:** Address reporting from staff EDI monitoring and diversity data from annual survey and reports for all staff and researchers, in improving cultural competency and EDI learning. If gaps exist, adjust developed **Research Inclusion** training modules or sessions, and expand provision of resources in resource Hub

5. Play an active role in informing and driving the national agenda for ethnic health research: contributing to the advancement of knowledge and practices in biomedical research.			
	Internal Actions	**Owner**	**Key Metrics**
Short- Term Objectives (1-2 years) and Medium-Term Objectives (2-3 years)			
• **Foster cross-BRC Theme collaborations and aim to submit at least one to two applications annually to major funders, focusing on research that addresses health inequalities and inequities**	**BRC Specific** Add item to Executive Board and Theme meetings to develop cross-BRC Theme grant collaborations focusing on research that addresses health inequalities and inequities.	Inclusion Platform Team, BRC Theme Leads, BRC Executive Board, BRC Manager and Director for Inclusion	BRC will submit at least one to two applications annually to major funders, focusing on research that addresses health inequalities and inequities. The Inclusion Platform team will aim to publish data on submitted grant applications focusing on addressing health inequalities an EDI report as part of the NIHR annual reporting and continue annually
Long Term Objectives (4-5 years)			
• **Continue to shape the national agenda for inclusive health research that addresses health inequalities**	**BRC Specific** BRC Theme leads will engage with the government by sitting on or chairing relevant national and international committees and attending parliamentary events that address health inequalities. BRC staff will publish articles that focus on addressing health inequalities in leading journals.	Inclusion Platform Team, BRC Theme Leads, BRC Executive Board, and Director for Inclusion	**By the end of Year 4:** Staff across the BRC will engage with governments events by attending two events or chairing two relevant national and international committees, focusing on research that addresses health inequalities and inequities. The **Inclusion Platform team** will aim to publish data on involvement of staff in government engagements and submitted journals focusing on addressing health inequalities, within the EDI report as part of the NIHR annual reporting.

Next steps

We recognise that our efforts in promoting equality, diversity, and inclusion, are shaped by our research and public engagement, with input from stakeholders, organisations, and the public. Our strategies and action plans will not remain static, but rather evolve and expand as we gain insights and identify additional needs. We are committed to providing regular updates to the BRC/CRF Executive Board, reflecting our progress in implementing the strategy and action plan. This serves as a vital means for monitoring our achievements, identifying areas for improvement, and ensuring ongoing improvement. Furthermore, we will review the strategy on an annual basis to ensure its continued relevance and effectiveness.

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