

# Equality, Diversity & Inclusion Framework



The NIHR Imperial Biomedical Research Centre (BRC) is a partnership between Imperial College Healthcare NHS Trust (ICHT) and Imperial College London (College).

It is led and delivered by employees of both organisations, who are bound by the respective policies and guidance of their employing organisation.

The NIHR Imperial BRC will adhere to the principles and aims of both organisations' policies<sup>1,2</sup> with respect to Equality, Diversity and Inclusion (EDI) and will aim to act as an exemplar in this area. This framework is the application of those more general institutional-level policies to the specific circumstances of the BRC itself.

The Framework describes the 7 most relevant objectives for integrating EDI in the BRC, where a positive impact can be measured over the lifetime of the programme.

Underpinning these are several key principles that will be embedded within each objective or activity.



# Underpinning Principles

The following principles should apply to all EDI objectives within the remit of the BRC. These should be borne in mind when developing action plans or implementing specific activities.

**Measurable:** we will take an evidence-based approach in terms of identifying issues or challenges in EDI within the BRC, 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 the ongoing success (or otherwise) of a particular action, as well as regular collection of relevant data to monitor progress.

**Proactive:** it is important to maintain momentum and act proactively to address barriers to equality. Leadership and management positions in the BRC, as well as those funded by the programme, should actively seek ways to enhance or implement EDI practice and culture where this is required. The BRC Executive will consider all suggestions seriously and, in turn, BRC leadership will seek to become more representative of the wider community.

**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 ICHT and the College, issues need to be identified that are specific to each protected characteristic (as defined by the NIHR as: geographical location, age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation, socioeconomic status or access to health or social care) in order to support activities and policy development.

**Reflective:** it is also important to reflect on both the current policies in the College, ICHT and BRC, and consider recent actions, 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 annually. 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.

**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.



# Objectives

## Summary

1. Utilising equitable and inclusive recruitment & selection practices
2. Building diverse leadership capacity
3. Signposting to existing mentoring schemes and informal support
4. Connect people to and develop new networks
5. Advocating for EDI and challenging existing norms
6. Representing the diversity of the patient community we serve, in our research activities
7. Diversity in BRC leadership and governance

### 1 We will seek to improve and diversify our recruitment and retention practices to develop a more equitable workplace.

<b>Actions</b>	Diverse recruitment panels at all stages of selection.
	Increase awareness of the Disability Confidence Scheme as well as overall provision of mental health support – mental health first aiders and training.
	Consider parental leave, nursery provision, family-friendly timing of events whenever possible, and assistance with childcare.
	Promote innovative ways to encourage greater diversity at application stage and throughout the hiring process, to be actively promoted when advertising any new role.

### 2 We will build diverse leadership capacity by creating equitable opportunities for current and future leaders.

<b>Actions</b>	Continue to abide by and promote the principles of the Recruitment and Employment Confederation, Athena SWAN, acas and Stonewall best practice and standards.
	Package of support and specific training for potential future leaders in areas identified as common barriers and incorporating ways to nurture diverse talent.
	Raise awareness of discrimination through training and development courses available, with specific training in EDI principles.
	Specialised training for Allied Health Professionals (AHPs) in identified areas requiring support
	Increase BRC involvement in Women/Diverse@Imperial weeks.

### 3 We will signpost to existing mentoring schemes and create and support new schemes that are of strategic importance to the BRC.

<b>Actions</b>	While it may not be required to have a formal mentoring scheme, the BRC should play an active role in facilitating and enabling these activities.
	Alongside the ‘reverse mentoring’ pilot scheme for BAME nurses and midwives with ICHT executives, encourage a similar scheme for Theme leads and BRC Executive for staff of BAME backgrounds.

## 4 We will connect people to existing networks and create and support new networks that are of strategic importance to the BRC.

<b>Actions</b>	While the BRC may not require the creation of networks extensively, a dedicated web space will be created to serve as a hub for finding supportive networks for people underrepresented in science and medicine in the College and ICHT.
	BRC to play a more active role in creating, developing, and supporting networks where it is relevant to the overall strategy for growing research and staff, particularly in less traditional areas with less existing support.
	BRC to play an active part in network supporting underrepresented groups such as the Women in Academic Medicine network.
	BRC to support Allied Health Professionals through our recently formed Healthcare Professionals Academic Group (HPAG).

## 5 We will advocate for a more equal, diverse and inclusive future within the BRC and beyond and play an active part in constructive challenge.

<b>Actions</b>	Identify EDI Champions to sit on each Theme Committee and in the BRC Executive, with a dedicated remit.
	Explain EDI strategy clearly and keep it open to continuous improvement.
	Establish meaningful and open two-way channels of communication.
	Create a culture of constructive challenge, up to and including questioning ICHT/College/NIHR policies where they are not within the ethos of EDI.

## 6 We will aim to ensure that the patient and public community we serve locally and nationally is reflected in the clinical and biomedical research we undertake through participation and public involvement in our research.

<b>Actions</b>	Develop systems to measure appropriate demographic and protected characteristics (as defined above), with a view to ensuring that participants in our clinical research studies and trials reflect the general patient population.
	Introduce a plan of action to ensure equity of access from all relevant demographic groups in the individual programmes and projects within the BRC.
	Expand the remit of the Patient Experience Research Centre to provide guidance and facilitation for BRC researchers to address elements of EDI through involving more diverse voices in PPIE activities.
	Proactive challenge of clinical trial recruitment to ensure representation from the community.

## 7 We will work to improve the diversity of senior leadership, governance and decision-making positions within the BRC.

<b>Actions</b>	Require a diverse representation for all decision-making panels and committees within the BRC governance structure.
	Mid-term review of BRC to include progress against defined metrics within our EDI plans and objectives.
	Require EDI as a rolling agenda item on all key decision-making committees.
	Fully embed EDI principles into succession planning for BRC leadership positions.



# References

1. Imperial College London [policy on EDI](#)
2. Imperial College Healthcare [NHS Trust policy on EDI](#)

Schedule of Review		
To be reviewed by the BRC Executive Committee annually according to the following schedule. The remit of the review will include whether activities have been completed and/or are on track and a review of whether new activities should be instigated.	April 2021	Version 1
	March 2022	Theme Review and EDI Consultation
	April 2022	BRC Executive Committee Review