



Equity, Diversity and Inclusion

Strategy 2023-2028



Contents

Section 1: Introduction	2
1.1 Background and Context	2
1.2 Statement of commitment: Our vision for Equity, Diversity and Inclusion at Greater Manchester PSRC	3
1.2.1 Our Vision	3
1.2.2 GM PSRC Partner Organisations	4
1.3. Structure and Governance	5
1.4. Our Resources	6
Section 2: Defining our priorities - Co-development of this Equity, Diversity, and Inclusion strategy.....	8
Section 3: PSRC Equity, Diversity, and Inclusion priorities	10
3.1 Defining underserved groups.....	10
3.2 Our priorities	10
3.2.1 Understanding our culture.....	10
3.2.2. Creating an inclusive research culture.....	12
3.2.3. Learning and development	14
3.2.4. Demonstrating excellence through sharing our learning.....	15
3.2.5. Monitoring and governance	16
Yearly objectives	17
Glossary of abbreviations	18
Appendix:.....	19
1. Strategies reviewed	19
2. References	19



Section 1: Introduction

This document sets out the Equity, Diversity and Inclusion Strategy for the National Institute for Health and Care Research (NIHR) Greater Manchester Patient Safety Research Collaboration (NIHR GM PSRC) between April 2023 and March 2028.

1.1 Background and Context

The National Institute for Health and Care Research Greater Manchester Patient Safety Research Collaboration (NIHR GM PSRC) is one of six NIHR Patient Safety Research Collaborations across England bringing patient safety research directly to frontline services.

The GM PSRC has been funded for five years from 1st April 2023 to 31st March 2028 and is a collaboration between the Northern Care Alliance (NCA) National Health Service (NHS) Foundation Trust, The University of Manchester, The University of Nottingham, and The University of Leicester.

Our website can be accessed here: <https://www.psrc-gm.nihr.ac.uk/>

We have four themes of work:

- **Improving medication safety** to prevent patients from being harmed by medicines
- **Enhancing cultures of safety** so that people and organisations are continually improving ways of working safely.
- **Developing safer health and care systems** to improve how multiple health and care providers work together to deliver care safely
- **Preventing suicide and self-harm** by identifying and developing innovative interventions to reduce these risks

Our aim is to develop, test and deploy sustainable safety innovations that reduce avoidable patient harm, and ensure that the best evidence is available to inform safer delivery of care. The GM PSRC aims to be a national exemplar of how research can improve patient safety for the whole population, especially those who are underserved by health and care systems. Across the North West and East Midlands we have 13 of England's 20 most deprived local authority areas. Our regions are home to diverse populations who experience greater health and social needs and inequities than many other regions of England. Therefore, understanding and reducing safety inequalities in health and care settings will be a core value underpinning all our themes of work outlined above.

The voice, experience and expertise of patients, service users, carers, communities and practitioners will be central to everything we do, and we will work in partnership with the public and communities to ensure our research leads to meaningful service improvement.



1.2 Statement of commitment: Our vision for Equity, Diversity and Inclusion at Greater Manchester PSRC

1.2.1 Our Vision

The vision of the GM PSRC is to provide the best possible evidence to ensure safe delivery of care. Our aim is to deliver cutting edge research to make health and care systems safe, especially for those people, families, and communities with the greatest need for improvement in patient safety. This will enhance patient outcomes and experience and ultimately save the NHS money. We will achieve this by working in partnership with patients, carers, and service users to ensure their lived experience is embedded in all our activities throughout the research cycle. We aim to develop strong links with underserved communities and seek to reflect those communities within our workforce. We will continually develop our approach to Equity, Diversity and Inclusion and strive to avoid tokenism, that can undermine meaningful change. This approach will engender research innovation and support the delivery of impactful research to improve safety in health and social care for all.

Our priorities reflect the Equality, Diversity and Inclusion objectives set out by The University of Manchester, Northern Care Alliance, University of Nottingham, and University of Leicester. Broadly, these centre around inclusive culture and working environment, leadership development, diversity, and equity across our workforce as well as in our research, and inclusive practice to generate a positive impact on our communities of focus. We will work in collaboration with local NIHR infrastructure on cross-infrastructure Equity, Diversity and Inclusion strategy development led by the Manchester Research & Innovation NIHR Oversight Board.

The approach taken in our strategy aligns to the NIHR Research Inclusion Strategy 2022-2027 by widening access and participation for greater diversity and inclusion, investing in our people, and embedding evidence-led practice into inclusion research in patient safety through the collection and analysis of diversity data. To achieve this, we will collaborate with partners as detailed in the following section.





Figure 1: NIHR Research Inclusion Strategy 2022-2027

1.2.2 GM PSRC Partner Organisations

The Greater Manchester PSRC is a collaboration with core, regional and national partners, as well as charities and industry. Working with partner organisations helps us to bring expertise and wide-ranging experience to our work, making what we do more relevant to diverse communities and health and care systems. We will link across NIHR infrastructure and draw upon expertise of the Centre for Ethnic Health Research, associated with NIHR Applied Research Collaboration East Midlands (ARC EM), to understand mechanisms to support and evaluate Equity, Diversity and Inclusion. We will also work with the wider PSRC Network (SafetyNet) to collaborate with PSRC partners on research inclusion initiatives such as the Safety Equity Network.

Core partners

- Greater Manchester Health and Social Care Partnership
- Integrated Care System Nottingham and Nottinghamshire
- Leicester, Leicestershire and Rutland Health and Social Care
- Health Innovation Manchester
- Manchester Academic Health Science Centre (MAHSC)
- Health Innovation East
- PSRC Network (SafetyNet)



Regional collaborators

- NIHR Infrastructure within Greater Manchester, Leicester, and Nottingham, including Biomedical Research Centres (BRCs) and Applied Research Collaborations (ARCs)
- The University of Manchester Innovation Factory
- Health Innovation Manchester
- Greater Manchester Equity Alliance
- Nottingham and Nottinghamshire VCSE Alliance
- The Leicester, Leicestershire and Rutland Integrated Care Board Voluntary, Community and Social Enterprise (VCSE) Alliance

Example national collaborators (this list is not exhaustive)

- The network of NIHR PSRCs located across England: Yorkshire and Humber, Midlands, Central London, North London, and Newcastle
- NIHR School for Primary Care Research (NIHR SPCR)
- NIHR School for Social Care Research (NIHR SSCR)
- National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH)
- Health Innovation Network
- Health Services Safety Investigations Body (HSSIB)

As part of our Public and Community Involvement and Engagement (PCIE) Strategy we will be linking in with Voluntary, Community and Social Enterprise sector organisations key to our communities of focus, for example, Samaritans, 42nd Street (Greater Manchester young people's mental health charity), Pathways Associates, and the Caribbean and African Health Network (CAHN).

1.3. Structure and Governance

There are several governance boards in place to help us meet our objectives. The overarching goals of the GM PSRC involve:

1. Working closely with patients, public and health and care providers to develop new patient safety interventions to improve safety across health and care systems.
2. Supporting patients, carers, service users, health and social care professionals to use these interventions to improve safety.
3. Studying the patient safety impacts of alternative ways of delivering care, including unexpected benefits and negative consequences of service changes.
4. Ensuring that our research produces safety improvements that are affordable and feasible nationally, and particularly for those individuals, families and communities who need it most.



GM PSRC Diversity Working Group

We will embed Equity, Diversity and Inclusion into our governance structures by creating a GM PSRC Diversity Working Group consisting of GM PSRC staff, students and public and community contributors and chaired by the Equity, Diversity and Inclusion Lead. This group will meet every four months and progress against our Equity, Diversity and Inclusion Strategy objectives will be fed into governance reporting structures outlined below. The PCIE Advisory Group chair or deputy chair will be a part of the GM PSRC Diversity Working Group, and will represent the Diversity Working group on the PSRC Governance Board.

The GM PSRC Governance Board: The GM PSRC Governance Board meets three times a year to help us work effectively with stakeholders and ensure our research has maximum impact on patient safety. A representative from the Diversity Working Group will attend the Governance Board meetings.

The GM PSRC Strategic Advisory Group: Our GM PSRC Strategic Advisory Group provides independent feedback while assessing our research strategy, ambitions, and progress, giving feedback and advice where necessary. We will ensure PCIE and Diversity Working Group representation at the Strategic Advisory Group meetings.

The GM PSRC Research Leads Group: This group is composed of theme leads from each of our four themes, the GM PSRC director, operational manager, Equity, Diversity and Inclusion lead, PCIE lead and PCIE/Equity, Diversity and Inclusion manager.

We will strive to have leaders across all our Governance structures who are role models for inclusion and diversity and who will lead change in organisational culture, fostering excellence in Equity, Diversity and Inclusion.

1.4. Our Resources

We have an overall core Equity, Diversity and Inclusion budget and a dedicated budget within each of the core research themes to assist us with our research inclusion and involvement goals. To support the delivery of our Equity, Diversity and Inclusion strategy, the GM PSRC has an Equity, Diversity and Inclusion lead, PCIE lead and PCIE manager. The Equity, Diversity and Inclusion lead is also part of the Equity, Diversity and Inclusion Champions programme, funded by the University of Manchester and led by 'Be What You See Consultancy', an Equity, Diversity and Inclusion training company. The purpose of these roles is to support the development of meaningful research inclusion across the collaboration. Additionally, we will pool resources with other NIHR infrastructure; for instance, the Equity, Diversity and Inclusion lead is also deputy lead for capacity building within the ARC-GM, the PCIE lead is also the PCIE lead for MAHSC, ARC-GM, and the NIHR SPCR. The PCIE/Equity, Diversity and Inclusion manager is a member of the GM PCIE forum hosted by ARC GM and is a member of the NHS England funded Research



Engagement Network Development (REND) programme working group led by the PCIE lead. The REND programme aims to work with the Integrated Care System, the Voluntary Community and Social Enterprise (VCSE) sector, and NIHR research infrastructure to maximise diversity and support inclusive research for tackling health inequalities. We will also collaborate with East Midlands Health Innovation Network through our Safety Cultures theme based at the University of Leicester and our Medication Safety theme based at Nottingham.

Equity, Diversity and Inclusion and PCIE staff:

- Penny Lewis, Senior Clinical Lecturer in Pharmacy Practice, Equity, Diversity, and Inclusion lead for GM PSRC
- Caroline Sanders, Professor of Medical Sociology, PCIE lead for GM PSRC
- Louise Gorman, Public and Community Involvement and Engagement/ Equity, Diversity, and Inclusion Manager for GM PSRC.



Section 2: Defining our priorities - Co-development of this Equity, Diversity, and Inclusion strategy

We have taken, and will continue to take, a multi-faceted approach to defining and refining our priorities in relation to Equity, Diversity, and Inclusion. In developing this strategy, we held a joint researcher and Public Contributor Equity, Diversity, and Inclusion and PCIE strategy priorities setting meeting on 27th July 2023 and additional individual meetings throughout August 2023. We followed a focus group approach to our meeting, allowing everyone to provide their views on Equity, Diversity and Inclusion priorities using an online whiteboard. The group identified priorities and plans for implementation as well as challenges, allowing us to co-develop priorities that are realistic and practical.

In addition, we met with the University of Manchester Academic Lead for Equality, Diversity and Inclusion, Professor Dawn Edge, to ensure our priorities aligned with wider [policy](#). We are working with the Equality, Diversity, and Inclusion leads for NIHR Greater Manchester BRC to feed into the cross-infrastructure Equity, Diversity, and Inclusion strategy group that will report into the Manchester Research & Innovation NIHR Oversight Board. We will also work collaboratively with our PSRC partners via the PSRC Network (SafetyNet) including engagement with the Safety Equity Network to iteratively develop Equity, Diversity, and Inclusion across all collaborations.

From the meetings outlined above, we co-developed our Equity, Diversity, and Inclusion priorities and strategy for the Collaboration. This strategy and the priorities contained within it, will be reviewed on a yearly basis with the GM PSRC PCIE Advisory Group and GM PSRC Diversity Working Group. considering wider Equity, Diversity, and Inclusion developments made across NIHR infrastructure and our partner organisations.

Our strategy also utilises Veza Global's Equity, Diversity, Inclusion and Belonging self-assessment tool. This assessment places an organisation on an Equity, Diversity, & Inclusion Maturity Model (shown in figure 2). We will use this assessment as one approach to understanding our strengths, areas of improvement and progress in relation to Equity, Diversity, and Inclusion.

To gauge our current standing in the Veza Global maturity model, we devised a Qualtrics survey comprised of maturity model assessment questions. These questions were adapted to be inclusive of public contributors' perspectives and for use in a UK context prior to being sent to all PSRC staff, public contributors, and students in post. The response rate was 66%, and our overall mean score positioned our organisation within the 'Championed' stage of the maturity model (see figure 2). However, over a third of responses (37%) were placed in the 'neither agree nor disagree' category due to our collaboration being newly formed - our staff, students and public contributors understandably require time to get an understanding of our performance in relation to Equity, Diversity, and Inclusion. Therefore, we will utilise the survey results in combination



with other approaches to help us develop a deep understanding of our attainment regarding Equity, Diversity, and Inclusion practice. We will therefore repeat this survey at future time points, once individuals get a sense of our culture within our collaboration. We will also seek to increase our response rate to future surveys as well as explore differing responses across our staff, public contributor and student groups.

At this point in time, we believe that we are actively identifying and seeking to address gaps in our diversity and inclusion practices and that we are about to embark upon the embedding of diversity and inclusion with the implementation of this strategy. This would correspond with the 'Discovery' stage of Veza Global's Equity, Diversity, & Inclusion maturity model.



Figure 2: The Veza Global Equity, Diversity, & Inclusion Maturity Model

We have driven the establishment of a joined-up approach to Equity, Diversity, and Inclusion, involving other NIHR Infrastructure, the NHS and care system, voluntary sector and universities within Greater Manchester and East Midlands. In preparing this strategy, we have built on existing and ongoing work. This strategy is a continuation of the work built in the former NIHR Greater Manchester Patient Safety Translational Research Centre (PSTRC), 2012-2023, where Public Contributors were involved at several points in the development of the PSRC funding application for every theme as well as throughout the wider plans. These Public Contributors have formed the basis of the PSRC Research Advisory Group and have been integral to developing the Equity, Diversity, and Inclusion priorities for the next five years.

The draft strategy has been reviewed and endorsed by the research theme leads, Director, operational management team, researchers, and public contributors.

Section 3: PSRC Equity, Diversity, and Inclusion priorities

3.1 Defining underserved groups

The term ‘underserved’ is widely adopted throughout the NIHR. The definition of underserved is context-specific and therefore unique to each individual research project in the GM PSRC. In the absence of a single definition of what constitutes an underserved group, we will use the following characteristics to describe the broad range of underserved people whom we work with.

- Higher healthcare burden with low inclusion in research
- Differences in engagement with or response to healthcare interventions compared to other groups with little research evidence addressing identified factors
- Disadvantaged groups within healthcare systems with lower inclusion, representation, and/or voice in research

Examples of underserved groups that are central to our *current* research include;

- Older people with frailty
- People who have been affected by acute kidney injury
- People with learning disabilities and/or autism
- People with mental health conditions
- Health and social care staff from minority ethnic groups

3.2 Our priorities

The GM PSRC Equity, Diversity, and Inclusion strategy has five strategic priorities:

1. Understanding our research culture
2. Creating an inclusive research culture
3. Learning and development
4. Demonstrating excellence through sharing our learning
5. Clear monitoring and governance.

3.2.1 Understanding our culture

Our first priority aims to understand our organisation, its people and its research culture so that we can strengthen our approach to diversity and inclusive research. To do this we will undertake Veza Global’s Equity, Diversity, & Inclusion maturity assessment and use a series of Equity, Diversity and Inclusion reflective questions. We will collect diversity data about our workforce, PhD students, research participants and public contributors using the NIHR Diversity dataset questions, providing data that is consistent across our NIHR



infrastructure and Partners. We will embed Equity, Diversity, and Inclusion into our governance structures by creating a GM PSRC Diversity Working Group consisting of GM PSRC staff, students and public and community contributors. This approach will give us a good understanding of our weaknesses from which we can continually reflect on and develop meaningful and achievable action plans to progress our maturity across all Equity, Diversity, and Inclusion elements.

The Equity, Diversity and Inclusion Lead and manager will have responsibility for the delivery of the following actions.

Short-term objectives

By the end of Year 1 we will have:

- Led a workshop based on a series of Equity, Diversity, and Inclusion reflective questions with participants from across the GM PSRC, public contributors and partnership organisations.
- Created a GM PSRC Diversity Working Group where the GM PSRC Diversity working group lead will report to the GM PSRC Governance Board.
- With our GM PSRC Diversity Working Group, developed a workable action plan for opportunities for improvement based on a detailed analysis of the results of our Equity, Diversity, & Inclusion maturity assessment, reflecting upon differences across staff, students and public contributors and responses to our reflective workshop questions.
- Based on the above exercise, modified, and added to our midterm and long-term Research Inclusion strategy objectives accordingly.
- Sought OneTrust Information Governance Risk Review (IGRR) approval to collect and store diversity data of our PSRC staff and Public Contributors.

Midterm objectives

By the end of Year 2 we will have:

- Engaged with other NIHR infrastructure to support discussions with Research Ethics Committees regarding the collection and storage of research participant diversity data in Greater Manchester and East Midlands.
- Developed a diversity data collection strategy that considers barriers and enablers to disclosure in collaboration with local NIHR infrastructure in Greater Manchester and East Midlands.

By the end of Year 3 we will have:

- Undertaken a mid-term assessment of equity, diversity and inclusion maturity with all workforce, students, and public contributors, reflecting on where progress has been made and where we need to improve to ensure progression along the maturity model, setting objectives for year 4 and 5.



- Implemented a mid-term assessment of diversity across our research participants, public contributors, workforce and students, using the NIHR Diversity data set questions, seeking to identify areas of underrepresentation.
- Reported and reflected on our diversity data with our Governance board and worked with the GM PSRC Diversity Working Group to develop achievable plans for improvement that will feed into the setting of year 4 and 5 objectives.

By the end of Year 4 we will have:

- Completed a review of our performance against the NIHR Race Equality Framework across all five domains with the identification of actionable changes to address issues identified

Long-term objectives for year 5 will be determined by the above objectives.

3.2.2. Creating an inclusive research culture

There are two dimensions to our priority *Creating an inclusive research culture*: i) building relationships through communication and openness, and ii) building strength through an improved participation process.

Building relationships through communication and openness aims to address how we relate to and share information with others. We will achieve this by setting up communication champions with lived experiences of specific underserved communities to build relationships with underserved communities. These communication champions will possess credible and authentic voices and seek to overcome barriers to research engagement, establishing trust and forming effective communications with disadvantaged communities. We will support our community champions through our established public contributor well-being protocol developed during our previous work as a PSTRC. We will assess current communications channels and work to develop more accessible formats of research and dissemination and make our Equity, Diversity and Inclusion strategy and values accessible to all. We will provide safe spaces for listening to the challenging experiences of our workforce, students, public contributors, and communities in order to improve our practice.

Building strength through an improved participation process will assess and review the way that we recruit public contributors, participants, workforce, and students. The approach we have already taken to workforce recruitment has sought to maximise diversity and inclusivity and we will build on this by working with the PSRC Diversity Working Group and drawing upon the expertise of the Centre for Ethnic Health Research, associated with ARC EM, to consider more accessible ways for people to engage and be included. We will assess the reasonable adjustments needed by our workforce, student, public contributors, and participants offering differing forms of engagement where possible,



for example, by ensuring flexible working is available to all and reflects our Athena Swan status, providing equity of access to meetings.

Short-term objectives

By the end of Year 1 we will have:

- Worked with our Public and Community Involvement and Engagement (PCIE) Advisory Group to produce an accessible format(s) of our Equity, Diversity, and Inclusion strategy.
- Set up quarterly meetings with our workforce, students, public contributors, and communities that provide a safe space for listening to concerns.
- Conducted a focus group to explore provision of peer-mentoring for workforce by Diversity Working Group public contributors.
- Assessed where we are on the NIHR INCLUDE roadmap of inclusion and use the findings to develop intervention points to improve inclusion of underserved groups.
- Held a meeting with our researchers and the GM PSRC Diversity Working Group to understand who our underserved communities are and set up a process to continually reflect upon this over the lifespan of the collaboration.

Midterm objectives

By the end of Year 2 we will have:

- Piloted provision of peer-mentoring for workforce by Diversity Working Group public contributors.
- Recruited and trained community champions from staff, students, and public contributors who possess lived experiences of specific underserved communities.
- Collaborated with community champions and communities to identify strategies for improving engagement and building relationships with communities.
- Worked with our Diversity Working Group and PCIE group to develop guidance on accessible formats of communication for study recruitment linked to our PCIE strategy priority 2: *Extend and Strengthen our Processes and Support*.
- Supported GM PSRC staff to undertake inclusive leadership training, part of the Manchester University Leadership Framework and similar training available at Nottingham and Leicester Universities.

By the end of Year 3 we will have:

- Worked with our Diversity Working Group and PCIE group to develop guidance on accessible formats of communication for study dissemination, linked to our PCIE strategy priority 2: *Extend and Strengthen our Processes and Support*.

Long-term objectives

By the end of Year 5 we will have:



- Embedded community champions across underserved communities identified as key to research projects with one champion per theme.
- For each of our research themes, we will collect one example of the impact of our working with our champions and share this with our local NIHR infrastructure to propagate and sustain this approach.

3.2.3. Learning and development

The third priority of training and development aligns to the NIHR Research Inclusion Strategy priority 3 “to improve and invest in the NIHR talent pipeline”. The aim of this is to increase our collective competence and understanding of Equity, Diversity and Inclusion. This priority aligns to the GM PSRC Capacity Building Strategy.

To achieve this priority, we will review the learning needs of our workforce and public contributors, develop and embed Equity, Diversity, and Inclusion training for all. We will invest in public contributor and researcher training and assess currently available local training opportunities, ultimately seeking to provide sign posting and access to training that can promote the incorporation of Equity, Diversity, and Inclusion principles from project conception to dissemination.

We will contribute to cross infrastructure initiatives for such training for researchers as well as public contributors. We will link with local NIHR infrastructure to provide access to training, such as the GM NIHR Research Training Network. We will assess who is accessing training and when, to understand equity of access. We will examine mechanisms to create awareness of opportunities to training to maximise our reach.

Short-term objectives

By the end of Year 1 we will have:

- Assessed and reviewed the Equity, Diversity and Inclusion training needs of workforce and public contributors in relation to study design, planning and impact assessments.
- Developed a core Equity, Diversity, and Inclusion training plan in partnership with our GM PSRC Diversity Working Group.
- Set up an area within our PSRC website signposting to Equity, Diversity, and Inclusion training and raising awareness of key resources, such as the NIHR INCLUDE online course.

Midterm objectives

By the end of Year 2 we will have:

- Rolled out Equity, Diversity and Inclusion training across all staff and students to build competence and understanding, achieving an 80% uptake.



- Delivered Anti-Racism, LGBTQIA+ and Neurodiversity workshops for all GM PSRC staff, students and public contributors delivered by the Equity, Diversity, and Inclusion lead with public contributors.
- Collated training resources on the PSRC website for researchers that support incorporation of Equity, Diversity and Inclusion principles from project conception to dissemination.

By the end of Year 3 we will have:

- Conducted a survey to assess access to Equity, Diversity and Inclusion training to understand where gaps exist and develop approaches to increase engagement. Findings will lead to the setting of long-term objectives.

Long-term objectives

By the end of Year 5 we will have:

- Undertaken an evaluation of researcher experiences and perceptions of the impact of Equity, Diversity and Inclusion training resources on funding and recruitment/involvement of diverse and underserved communities.
- Evaluated diverse public contributor experiences of Equity, Diversity and Inclusion training.

3.2.4. Demonstrating excellence through sharing our learning

The fourth priority of demonstrating excellence through sharing our learning focuses on demonstrating change in Equity, Diversity and Inclusion and communicating that change to stakeholders and the public in open and accessible ways, through publications (including blogs) and in-person events. We will create ongoing Equity, Diversity and Inclusion impact cases and include Equity, Diversity and Inclusion impact in funding reports to NIHR. We will share impact cases through our network and partner organisations. We will work with our community champions to ensure research is disseminated to the communities the research is about.

Long-term objectives

By the end of Year 4 we will have:

- Submitted an Equity, Diversity and Inclusion based abstract to a national conference.
- Contributed to the NIHR Greater Manchester BRC/CRN case-study library.

By the end of Year 5 we will have:

- Held a PCIE and Equity, Diversity and Inclusion symposium in partnership with our communities to share impactful stories and highlight excellence in Equity, Diversity and Inclusion.



- Submitted an Equity, Diversity and Inclusion based paper to a peer-reviewed journal.

3.2.5. Monitoring and governance

The fifth and final priority of monitoring and governance aims to embed a structure of accountability for our Equity, Diversity and Inclusion strategy through regular monitoring of our impact and feeding this into governance structures. We will achieve this by collecting and responding to feedback from our workforce, students and public contributors over the lifespan of the GM PSRC. We will ensure all workforce, students and public contributors are aware of the University of Manchester Dignity at Work and Study Policy, the Dignity and Respect at Leicester Policy, the Dignity at Nottingham Policy, and the Northern care Alliance Dignity at Work Policy that seeks to ensure a supportive, confidential, and transparent process and encourage respect and trust. We will work to develop our Equality Impact Assessment (EqIA) process to ensure that all activities give due consideration to fairness and that action is taken to remove barriers to inclusion and to adapt flexibly to specific needs of our communities.

Short-term objectives

By the end of Year 1 we will have:

- Set up and established our terms of reference for our GM PSRC Diversity Working Group with members drawn from across the GM PSRC, public contributors, and partnership organisations in equal number.
- Conducted an assessment of our practice in relation to the use of Equality Impact Assessments (EqIA)
- Set up clear and accessible feedback and procedural mechanisms for our staff, students and public contributors.
- Linked with the PSRC Network (SafetyNet) to set out our collaborative plans for Equity, Diversity and Inclusion activities.

Midterm objectives

By the end of Year 2 we will have:

- Co-developed and implemented our PSRC EqIA process with the GM PSRC Diversity Working Group and added this to our website.

By the end of Year 3 we will have:

- Evaluated use of the EqIA process by research staff, reporting to the GM PSRC Diversity Working Group.

Long-term objectives for years 4 & 5 will be set as an outcome of our existing objectives.



Yearly objectives

Each year we will hold three GM PSRC Diversity Working Group meetings over the course of the year, with minutes available outlining key issues raised, feedback on progress on the strategy objectives and actions to be taken.



Glossary of abbreviations

ARC	Applied Research Collaborations
ARC-GM	Applied Research Collaboration Greater Manchester
BRC	Biomedical Research Centres
CAHN	Caribbean and African Health Network
EqIA	Equality Impact Assessment
HSSIB	Health Services Safety Investigations Body
IGRR	Information Governance Risk Review
MAHSC	Manchester Academic Health Science Centre
NCA	Northern Care Alliance
NCISH	National Confidential Inquiry into Suicide and Safety in Mental Health
NHS	National Health Service
NIHR	The National Institute for Health and Care Research
NIHR ARC EM	The National Institute for Health and Care Research Applied Research Collaboration East Midlands
NIHR GM-PSRC	The National Institute for Health and Care Research Greater Manchester Patient Safety Research Collaboration
NIHR SPCR	NIHR School for Primary Care Research
NIHR SSCR	NIHR School for Social Care Research
PSTRC	Patient Safety Translational Research Centre
PCIE	Public and Community Involvement and Engagement
REND	Research Engagement Network Development
VCSE	Voluntary Community and Social Enterprise



Appendix:

1. Strategies reviewed

- Northern Care Alliance – Intentional inclusion at the heart of our community: our 10 year vision for change (provided as pdf)
- [University of Manchester - Equality, Diversity, and Inclusion Strategy: our people, our values, our future](#)
- [University of Nottingham – Equality, Diversity, and Inclusion: strategic delivery plan 2019](#)
- [University of Leicester – A Culture of Equality: Equality, Diversity and Inclusion Strategy](#)
- [NIHR – Equality, Diversity, and Inclusion Strategy 2022-2027](#)
- GM PSRC - Public and Community Involvement and Engagement strategy (we will link to this strategy once it is published)

2. References

- EDI&B Maturity Model. <https://diversity.tapnetwork.ca/maturity-model1> Accessed 30.09.23
- NIHR INCLUDE roadmap. <https://sites.google.com/nih.ac.uk/include/home> Accessed 30.09.23
- NIHR Race Equality Framework. <https://people.from.ethnic.minority.backgrounds.nih.ac.uk/documents/nih-race-equality-framework/30388> Accessed 30.09.23

