UNIVERSITY OF LEICESTER

Centre for BME Health
reducing health inequalities

NIHR | Collaboration for Leadership in Applied Health Research and Care East Midlands

2018 Annual Report
Centre for BME Health

FOREWORD

2018 Witnessed considerable achievements for the Centre in research, community involvement and teaching. In our first year working in collaboration with researchers in Leicester and beyond we have achieved a number of funding awards, publications and developed community interventions.

We have successfully established an expert steering committee, bringing together academic expertise, clinical knowledge and community perspectives to drive our Centre's research agenda and ensure our work meets a local need. Furthermore, established in 2018 is the Community Partners Panel and Research Volunteers register. We have a panel of 16 members from different backgrounds, who represent the voice of not only themselves but a large number of community organisations that they are involved with. Thereby the work of centre is informed by the community and learning and outcomes can be disseminated widely. The Research Volunteers Register is a database of individuals who wish to be involved in research that addresses health inequalities, this resource continues to grow.

The centre is proud to have partnered with Leicester Changing Diabetes: Leicester was the first UK city to join the Global Cities Changing Diabetes programme and was chosen due to the high prevalence of Type 2 Diabetes (8.9%) and a high South-Asian population. A number of initiatives have resulted from this partnership predominantly in the arena of Type 2 Diabetes prevention.

We have built programmes working with the locally based internationally renowned cricket, and football clubs to deliver novel interventions that reach populations otherwise disengaged. Furthermore, we have designed and delivered cultural-tailored interventions to address social isolation, and improve diabetes management and mental health.

Much of our work involves close involvement of local communities, for example our work supporting the local African-Caribbean community to establish a Prostate Cancer awareness group for African-Caribbean men. This group has grown in popularity in the last 12 months and has contributed to a rise in prostate cancer attendance for this demographic locally, resulting in improved uptake to screening, earlier diagnosis and more effective treatment.

Building on the work of National Institute for Health Research (NIHR) Collaboration for Leadership in Applied Health Research and Care East Midlands (CLAHRC EM), the centre was commissioned to roll out across Leicester City the 'Safer Ramadan' Programme. The aim of Safer Ramadan is to raise community awareness of fasting and diabetes, train health care professionals in the care and management of patients with diabetes who wish to fast, and deliver face to face patient education. The programme has been well received and there has been national and international interest in adoption of the programme.

All of our achievements (including those presented in the following document) are the result of hard work, commitment of the Centre's team and the invaluable contribution made by local community organisations and community members.

Professor Kamlesh Khunti
Director, Centre for Black and Minority Ethnic Health

REDUCING HEALTH INEQUALITIES

We address the health inequalities in healthcare access and health outcomes by; supporting individuals and organisations in planning and undertaking research and healthcare delivery involving and understanding Black and Minority Ethnic (BAME) and seldom heard communities.

We have community-based research staff who engage with seldom heard communities and inspire community- led research. We design and deliver resources and alternative methodologies that are informed and led by communities who are 'not typically reached' by some clinicians and researchers.

We are committed to actively inspiring and developing dynamic and collaborative partnerships between; patients, public, community and voluntary sectors, researchers, health and social care organisations and others, to help address ethnic health disparities.

In 2018, a Steering Committee was established with the University of Leicester to provide strong, sustainable, strategic focussed leadership and governance.

Training

Community Engagement Training "focuses on how to ensure effective engagement with BAME communities, including practical tips as well as interactive sessions. It is grounded in Equality and Diversity principles and includes a quick refresher of important EDI legal stipulations, information and concepts."

"The Cultural Competence course(s) extends the previous training by focusing on what constitutes cultural competence, why it is important, how it works and what information is needed to be effective and competent in this area. It includes four components – self-awareness, cultural knowledge, cross-cultural skills and practice accompanied with a guidance toolkit".

Patient and public involvement:

The involvement and engagement of the community is critical. The development of a Community Partners Panel (CPP) aims to ensure that involvement and engagement will be embedded with patient, public and partner perspectives being integrated into all of the research process. The motivation is to ensure that ethnicity and health inequalities are on the agenda for research and service providers.

The 16 CPP members have attended the induction, research training and signed the agreement to work with us, all of whom represent a wide age rage, genders, ethnicity, religious beliefs and sexual orientation. There are a further 5 applications received to the panel.

We know that taking part in research gives people the opportunity to make a difference and to work towards better healthcare for everyone. We have been therefore been actively recruiting people from diverse communities to register with us for research opportunities. This CCP is available to researchers and organisations collaborating with the Centre to widen participation to their projects.

RESEARCH ACTIVITY

Research grant activity:

The Staff at the Centre for BME health have submitted 10 grant applications to 7 funding organisations totalling £2.8 million

- The staff have collaborated with 14 principal investigators on 20 grant applications. To a total value of £32,358,000.
- £30.1m awarded in 2018

Research Support Requests:

In 2018 there were 50 support requests received into the Centre for BME Health.

- 23 Research Collaborations
- 2 public engagement
- 13 community health events
- 8 signposting to other relevant organisations or providing advice 4 had no further contact following the CBMEH response

Conferences:

13 UK conferences attended, keynote invitations and presented including:

- International Perspectives on Evaluation of PPI in Research 2018, Newcastle 2018
- Diabetes UK
- ADA
- EASD
- All Parliamentary Committee

Organisations:

NIHR | National Institute for Health Research

wellcome trust

British Heart Foundation

MRC Medical Research Council

World Cancer Research Fund International

novo nordisk

Boehringer Ingelheim

Postgraduate Research

The centre supervised 6 PHD students and 2 MSC students in 2018

Yogini Chudasama:

Epidemiology and health care costs of multi-morbidity in the UK

Muhammad Usman:

A systematic review, retrospective cohort analysis and decision model to assess the clinical and cost-effectiveness of multiple risk factor control in individuals with type 2 diabetes and microalbuminuria

Humaira Hussein:

Comparative effectiveness of sodium-glucose co-transporter-2 inhibitors and glucagon-like peptide-1 receptor agonists in type 2 diabetes mellitus: randomized and real-word evidence.

Elpida Vounzoulaki:

Type 2 diabetes in women after a diagnosis of gestational diabetes: understanding uptake to screening, progression rates and costs, using evidence synthesis methodologies.

Cameron Riaz

Investigating the acute effect of alternative forms of physical activity in a multi-ethnic population: The Yoga Study

"Completing a PhD with the Centre for BME Health has been a fantastic experience. I am provided academic guidance and support from two of my supervisors, Dr Natalie Darko and Professor Kamlesh Khunti and support from other members of the team has helped with many other aspects of my PhD".

"This support ranges from community outreach work to inform and promote my work and develop my community outreach/PPI skills to translation services for some projects that form part of my PhD".

"Overall, working with the Centre for BME Health is a great experience and provides me expert local knowledge of the communities we want to help improve the health of."

Preeti Chiran:

Dyslipidaemia: frequency of association in IFG vs IGT

Anna Colenette:

Care Pathways for Pre-hospital management hypoglycaemia

Publications

15 publications published and due for submission – sample of publications below.

Brady EM, Bodicoat DH, Hall AP, Khunti K, Yates T, Edwardson C, Davies MJ. Sleep duration, obesity and insulin resistance in a multi-ethnic UK population at high risk of diabetes. Diabetes Res Clin Pract. 2018 May; 139:195-202. doi:10.1016/j.diabres.2018.03.010. [Epub 2018 Mar 9]. PMID: 29526681.

Lewis, C., Latif, Z., Hill, M., Riddington, M., Lakhanpaul, M., Arthurs, O.J., Hutchinson, J.C., Chitty, L.S. and Sebire, N.J., 2018. "We might get a lot more families who will agree": Muslim and Jewish perspectives on less invasive perinatal and paediatric autopsy. PloS one, 13(8), p.e0202023.

Tyrer F, Dunkley AJ, Singh J, Kristunas C, Khunti K, Bhaumik S, Davies MJ, Yates T, Gray LJ (2018). Multimorbidity and lifestyle factors among adults with intellectual disabilities: a cross-sectional analysis of a UK Cohort. Journal of Intellectual Disability Research [Under revision]

Misra A, Sattar N, Tandon N, Shrivastava U, Vikram NK, Khunti K, Hills AP. Clinical management of type 2 diabetes in south Asia. The Lancet Diabetes & Endocrinology. 2018 Oct. DOI:https://doi.org/10.1016/S2213-8587(18)30199-2

Hills AP, Arena R, Khunti K, Yajnik CS, Jayawardena R, Henry CJ, Street SJ, Soares MJ, Misra A. Epidemiology and determinants of type 2 diabetes in south Asia. The Lancet Diabetes & Endocrinology. 2018 Oct. DOI:https://doi.org/10.1016/S2213-8587(18)30204-3. The Lancet Diabetes & Endocrinology. 6(12) 966-978

Hills AP, Misra A, Gill JR, Byrne NM, Soares MJ, Ramachandran A, Palaniappan L, Street S, Jayawardena R, Khunti K, Arena R. Public health and health systems: implications for the prevention and management of type 2 diabetes in south Asia. The Lancet Diabetes & Endocrinology. 2018 Oct. DOI:https://doi.org/10.1016/S2213-8587(18)30203-1

Yates T, Edwardson E, Celis-Morales C, Biddle S, Davies MJ, Esliger D, Henson J, Kazi A, Khunti K, Sattar N, Sinclair AJ, Rowlands A, Velayudhan L, Zaccardi F, Gill JMR. Metabolic effects of breaking-up prolonged sitting with standing or self-paced walking on postprandial metabolism in older South Asians and White Europeans: a randomized acute study. J Gerontol A Biol Sci Med Sci. 2018 Nov 7. doi: 10.1093/gerona/gly252. [Epub ahead of print] PMID: 30403772

Owusu Adjah ES, Bellary S, Hanif W, Patel K, Khunti K, Paul SK. Prevalence and incidence of complications at diagnosis of T2DM and during follow-up by BMI and ethnicity: a matched case-control analysis. Cardiovasc Diabetol. 2018 May 15;17(1):70. doi: 10.1186/s12933-018-0712-1. PMID: 29764436

Fahami R, Dhalwani N, Khunti K, Davies M, Seidu S. Postpartum monitoring of women with a history of gestational diabetes - A cross-sectional study of an inner-city population. Prim Care Diabetes. 2018 Dec 21. pii: S1751-9918(18)30155-4. doi: 10.1016/j.pcd.2018.11.010. [Epub ahead of print]. PMID: 30583931

Rowlands AV, Harrington DM, Bodicoat DH, Davies MJ, Sherar LB, Gorely T, Khunti K, Edwardson CL. Compliance of Adolescent Girls to Repeated Deployments of Wrist-worn Accelerometers. Med Sci Sports Exerc. 2018 Jul;50(7):1508-1517. doi: 10.1249/MSS.0000000000001588. [Epub 23 Feb 2018]. PMID: 29474208

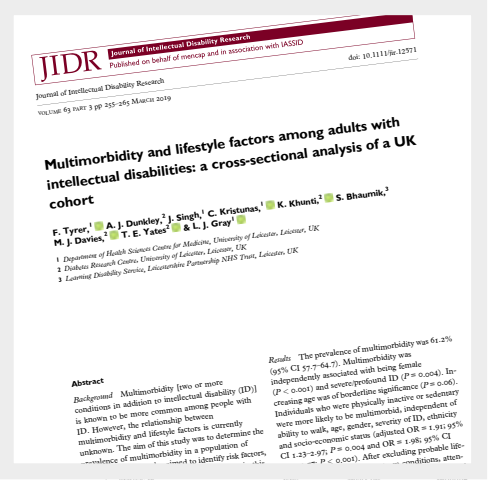
Sukumar N, Dallosso H, Saravanan P, Yates T, Telling C, Shorthose K, Northern A, Schreder S, Brough C, Gray LJ, Davies MJ, Khunti K. Baby Steps - a structured group education programme with accompanying mobile web application designed to promote physical activity in women with a history of gestational diabetes: study protocol for a randomised controlled trial. Trials. 2018 Dec 12;19(1):682. doi: 10.1186/s13063-018-3067-8.

Khunti K, Cigrovski BerkoviĐ M, Ludvik B, Moberg E, Barner Lekdorf J, Gydesen H, Pedersen-Bjergaard U. Regional variations in definitions and rates of hypoglycaemia: findings from the global HAT observational study of 27 585 people with Type 1 and insulin-treated Type 2 diabetes mellitus. Diabetic Medicine. 2018 May 5. doi: 10.1111/dme.13662. PMID: 29729048

Dhalwani NN, Zaccardi F, Davies MJ, Khunti K. Body mass index and mortality in people with and without diabetes: a UK Biobank study. Nutrition, Metabolism & Cardiovascular Diseases. doi.org/10.1016/j.numecd.2018.07.007 [Epub 29 Jul 2018].

Willis A, Crasto W, Gray LJ, Dallosso H, Waheed G, Gray G, Davies MJ, Khunti K. The General Practitioner Prompt Study to Reduce Cardiovascular and Renal Complications in Patients With Type 2 Diabetes and Renal Complications: Protocol and Baseline Characteristics for a Cluster Randomized Controlled Trial. JMIR Res Protoc. 2018 Jun 8; 7(6):e152. doi: 10.2196/resprot.9588. PMID: 29884609

Chatterjee S, Davies MJ, Stribling B, Farooqi A, Khunti K. Real-world evaluation of the DESMOND type 2 diabetes education and self-management programme. Practical Diabetes. 2018 Feb 8; 35(1): 19-22. doi: 10.1002/pdi.2154.



JIDR Journal of Intellectual Disability Research
Published on behalf of mencap and in association with IASSID

Journal of Intellectual Disability Research

doi: 10.1111/jir.12571

VOLUME 63 PART 3 pp 255–265 MARCH 2019

Multimorbidity and lifestyle factors among adults with intellectual disabilities: a cross-sectional analysis of a UK cohort

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3 *Learning Disability Service, Leicestershire Partnership NHS Trust, Leicester, UK*

Abstract

Background Multimorbidity [two or more conditions in addition to intellectual disability (ID)] is known to be more common among people with ID. However, the relationship between multimorbidity and lifestyle factors is currently unknown. The aim of this study was to determine the

Results The prevalence of multimorbidity was 61.2% (95% CI 57.7–64.7). Multimorbidity was independently associated with being female ($P < 0.001$) and severe/profound ID ($P = 0.004$). Increasing age was of borderline significance ($P = 0.06$). Individuals who were physically inactive or sedentary were more likely to be multimorbid, independent of ability to walk, age, gender, severity of ID, ethnicity and socio-economic status (adjusted OR = 1.91; 95% CI 1.23–2.97; $P = 0.004$ and OR = 1.98; 95% CI

HEALTH IS
EVERYONE'S BUSINESS

Interdisciplinary Research

- **LEAD (Leicester Ethnicity Aging and Dementia) Tiger Team -** The CBMEH has supported the LEAD Tiger Team application lead by Professor Elizabeta B. Mukaetova- Ladinska and Professor John Maltby. The Leicester Ethnicity Aging and Dementia (LEAD) Tiger Team is an interdisciplinary UK BAME ageing and dementia research group. This team is developing projects targeted at grant applications, publications, and impact. The CBMEH is leading the delivery of culturally appropriate dementia assessment tools and services for BAME populations within the context of need, genetics, co-morbidity (diabetes, vascular problems), diet/lifestyle factors, and sociological and cultural factors (culture, language, help-seeking, carers and the healthcare system).

- **James Lind Alliance -** Priority Setting Partnerships (PSPs) enable clinicians, patients and carers to work together to identify and prioritise uncertainties about the effects of treatments that could be answered by research. While the James Lind Alliance (JLA) facilitates these partnerships, the funding and organising is done by the PSP itself. The CBMEH is a member of the PSP on heart surgery to find their agreed set of research priorities, whether that be about prevention of heart disease, diagnosis, or treatment and care of people undergoing heart surgery.

- **Dementia Steering Group –** the Centre was invited to be on the steering committee of a UoL research group, diagnosis and management of dementia in BAME groups

> *"The direct face to face approach used by the BME team of meeting directly with the community through the support of the agencies that work with them has allowed the time needed for the BME team to build positive and trusting relationships."*
>
> ***Kealey Sly,***
> *Leicestershire GATE*

- **Spring research group -** The Centre for BME health is a member of the Northamptonshire Special research Interested Group (spring) for equality and inclusion, which includes a specific theme for BME mental health.

- Research staff from the Centre contributed to a discipline-bridging collaboration developing a training package for research staff based on the views and experiences of multi-generation South Asian families living with cardio-metabolic disease in Leicestershire. Funded through the Welcome Trust ISSF scheme the work has used a theatre forum approach- using actors playing the part of research participants to highlight some of the barriers and facilitators to participation in health research in this community.

- Dr Natalie Darko has been invited by University of West Indies to present at Caribbean High Performance Summit to discuss sport, policy and health in the Caribbean context. She has also been invited to meet with the Ministries of Sport and Tourism and Health and visit sport and health organisations. Other invited speakers include the Dean of Faculty of the Sport West Indies, Olympic medallist Veronica Campbell Brown, VRB Healthcare, Manchester United, and Team Denmark.

BME CENTRE LED ACTIVITIES

Play Domino: Talk Prostate

- Prostate cancer is the most common cancer in men.
- Black men are 2-3 times more likely to develop this cancer than white men and their death rate is twice as high.
- Black men are likely to develop prostate cancer at a younger age.
- It is essential that black men in particular know their risk.

The Centre for BME Health has responded to this by working with the community to devise a culturally tailored programme to improve uptake to prostate cancer screening amongst African- Caribbean Men. This project is funded by CLARHC-EM and supported by Prostate UK and Prostaid Charity. Currently, we are delivering;

- Prostate cancer awareness/support groups with 25 members attending every two weeks.
- Awareness raising events to over 600 African Caribbean people, two YouTube videos and one song 'Check yourself'.
- The programme has already received international interest and has been shared in Houston, Jamaica, Barbados, Canada, Dominican Republic and Antigua.

> *"Thought the day was a real success and it I am so pleased to hear that you have had such a positive response from the local community because ultimately it is these people we want to engage with most."*
>
> ***Prostate Cancer UK,***

> *"Your insights have had a real impact and are being used as evidence for service developments going forward."*
>
> ***Macmillan Cancer Support ,***

Participant feedback

"As a result of Play Domino Talk Prostate, I have been for the test, I am now able to talk more freely and openly about prostate cancer. I make sure that I do my bit by spreading the word."

"Play Domino Talk Prostate sessions has helped me to get my life back."

"I don't say this lightly, but it is my opinion that the work you are engaged in will ultimately save lives."

"Before this, I was feeling so low and alone, now I am involved and play dominoes 3 days every week with the Six Love Play Domino Talk Prostate Family."

"I have become more aware of the high risk that I and my fellow African-Caribbean men are facing."

"Your work is clearly having an impact in the community."

"Keep up the good work because it is clearly needed and ultimately is saving lives."

"This Campaign is one of the most meaningful and effective that I have seen."

"I now feel that Play Domino Talk Prostate have struck a cord in me and my fellow black men."

"I was at the Launch and I have never seen us sit so still and listen to health issues in this way."

Safer Ramadan

- 20% of the South Asian community has type 2 diabetes.
- The Muslim population within England and Wales is approximately 2.71 million (2011 census).
- The estimated number of UK Muslims with diabetes is 320,000.

There are risks associated with fasting in people with type 2 diabetes. As a result fasting has previously been discouraged by the medical profession. A Safer Ramadan aims to overcome these barriers between HCPs, patients and religion to provide education and awareness of how people with type 2 diabetes can safely fast during Ramadan with help from their health care provider.

There are 3 components.

1. HCP training
2. Community awareness
3. Education sessions

Testimonials

"This work has led to a number of community members seeking the support they needed from their GP with diabetes related complaints, and have accessed their GP at an earlier stage than they otherwise would have."

Kealey Sly,
Leicestershire GATE

"Very pleased with the service provided… Process was well organised from recruiting phase through to execution of focus group, the team was responsive and communicative throughout the process."

Anonymous,

"We literally couldn't have done it without the support provided from the service, as we do not have the knowledge of the needs of the communities we were seeking to recruit."

Natasha Bayes,
University of Northampton,
March 2017

"Support with the recruitment of British South-Asian participants to our focus-groups was excellent."

Dr Prinjha,
University of Oxford

Traveller, Gypsy and Roma Health priorities

One ethnic group that is largely overlooked in research is the Gypsy, Traveller and Roma community. It is estimated that there are 300,000 people in the UK and at least 2000 in Leicestershire.

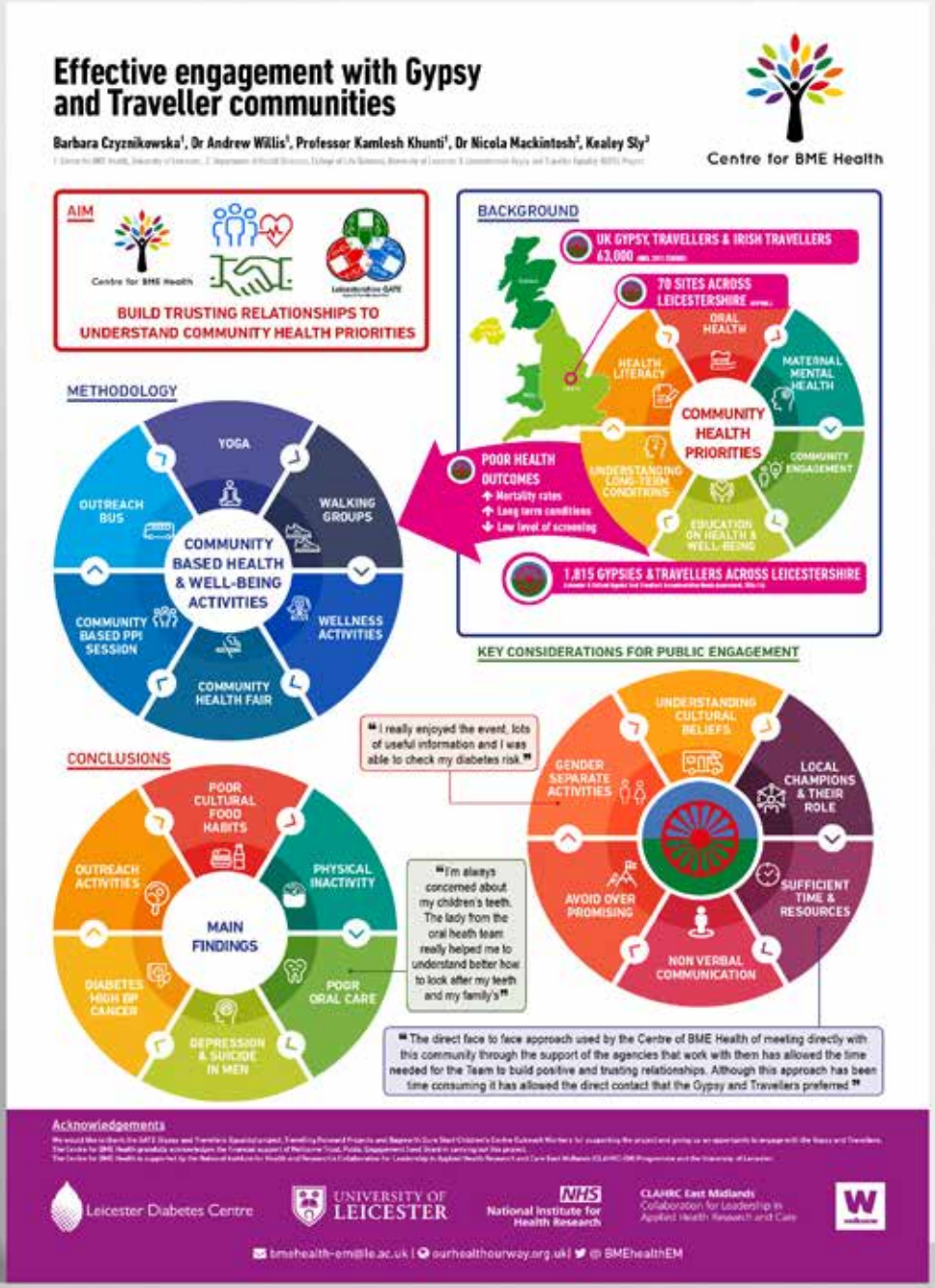
This is a marginalised community who suffer extreme levels of prejudice and discrimination.

The centre was awarded a small grant of £500 to work with the community to identify 'what are the most important health issues to you?' and what initiatives would you like to see?

Physical inactivity, obesity, access to screening services and limited cultural competence of health professionals were some of the issues identified.

The work has been recognised nationally with a poster presentation at the 'Involve' conference on December 2018 and an effective engagement workshop at the Travellers Movement conference in November 2018.

> *The BME Centre project has raised awareness of diabetes, oral health issues, diet and exercise and mental wellbeing within the Gypsy and Traveller communities through yoga and exercise classes, advice sessions at children's centres and diabetes checks and advice at GRT events.*
>
> ***Kealey Sly,***
> *Leicestershire GATE*



Awareness Raising & risk prevention of Type 2 diabetes

The Leicester Diabetes Risk Score adopted by Diabetes UK as the national tool for assessing risk has been translated into Bengali, Punjabi and Guajarati by the Centre for BME health.

In 2018 the CBMEH organised or attended 20 events to raise awareness of and measure individuals risk of Type 2 diabetes (T2DM).

4 sports events

2 faith settings

2 workplaces

1 religious festival

9 community organisations

1 school

1 hospital

721 risk scores were performed

Walking Cricket and Healthy Goals

Working jointly with Leicester Changing Diabetes the CBMEH has developed partnerships with Leicester City Football Club and Leicester County Cricket Club. These clubs were previously struggling to engage with Leicester's diverse communities. However, by working together a number of barriers to engagement were identified. Including location, perception of sports clubs, understanding of physical activity and peer support. The CBMEH community support officer acted as the conduit between the clubs and communities to develop and implement programmes targeted for South-Asian participants.

Walking Cricket is a 1.5 hour session held at Leicester Arena, the venue of the Leicester Riders Basketball team based in the heart of the community. The sessions run for 10 weeks and include cricket skills lessons delivered by LCCC coaches, followed by games of walking cricket. There are plans to expand this programme in 2019.

Healthy Goals is a 12 week health education and physical activity programme. The educational content around lifestyle and diet has been designed to suit the audience and is followed by a 1 hour physical activity sessions delivered by Leicester City football club community coaches.

In 2019 we will continue this partnership to deliver Healthy Goals in a female only setting to women who may be inactive because of cultural traditions that prevent access to provision in a typical sports facility.

"The programme is a great way for men and women of a certain age to socialise, while also increasing their exercise levels at a more relaxed speed. Shirish is a perfect example of how it's never too late."

"I'm 66 years old and this is my first experience of playing cricket! It keeps me physically active, stress-free and I have lots of fun as well as making new friends"

"The sessions were very informative and interactive. I looked forward to attending the sessions each week. Also enjoyed the exercise sessions which were fun. Basically, it was a lot of fun while being active".

" I learnt a lot about having a healthy diet, the risk factors that would affect my body and how to set up realistic goals. Most of all it made me realise that my health should be my number one priority.".

LEICESTER CITY FOOTBALL CLUB

LEICESTERSHIRE COUNTY CRICKET CLUB
ESTABLISHED 1879

MEDIA REPORTS

TWITTER:

- @BMEhealthEM
- 392 Followers

PRESS RELEASE:
Fitness taster sessions delivered to Leicestershire's Traveller Community

- 7 total stories (1 broadcast)
- 179,438 viewer/readers

PRESS RELEASE:
Walking Cricket aims to push the boundaries for exercise in Leicestershire

- 5 total stories (1 broadcast)
- 24,628 viewer/readers

WEBSITE:

- www.ourhealthourway.org.uk
- Jan 1, 2018 - Dec 31, 2018
- 10,700 Page views
- 3,022 New users

PRESS RELEASE:
Our Health, Our Way consultation

- 6 Press releases
- 15 total stories (1 broadcast)
- 187,904 viewer/readers

PRIORITIES FOR 2019

Research

- Increase and widen the involvement and representation of BME and seldom heard populations in research activities conducted throughout the University of Leicester.
- Capture and showcase previous research (locally, nationally and internationally) that has focussed on ethnic health and wellbeing.
- Increase research income for applied health and interdisciplinary research projects through application of four research grants led by CBMEH.
- Continue to deliver a research design service to minimum of two internal and two external academic institutions, advising on recruitment issues, research document translation, cultural sensitivity, public involvement and engagement with BME and seldom heard groups.

Community engagement activity

- Work with the Leicestershire's CCG's to advise on STP and Equality and Inclusion Measures by consulting with the local community in partnership for 2019 plans
- Increase by 20% the number of people registering their interest in being a research participant.
- Complete the translation of the Leicester Self-assessment diabetes risk score into Urdu
- Develop and launch a toolkit for prostate cancer awareness amongst BME men
- Increase the support requests received to the CBMEH by 25% from 2018
- Prepare for and initiate a minimum of two ARC funded ethnicity and diversity projects
- Apply for and secure funding to ensure sustainability of sports based community initiatives

Training

- Deliver a minimum of five 'Engaging BME Communities' training courses to research staff, HCPs and external organisations.
- Complete and launch the Cultural Competence training for research staff, HCPs and external organisations.

Organisational

- Host the Centre for BME Health AGM in the summer of 2019.
- Implement and deliver new website and create a strong brand identity for the Centre for BME Health.
- Devise a central resource hub on the new website to support individuals, researchers and organisations on improving equality and inclusion of BME and seldom heard communities.
- Apply for a minimum of two capital funding bid applications (e.g Garfield Weston Foundation) in collaboration with Philanthropy Alumni and Community Engagement Team to expand CBMEH community and staff space.
- Establish and formulize PPIe relationship and partnership agreement between the CBMEH and Biomedical Research Centre by December 2019
- Recruit as a minimum an additional five people to the Community Partners Panel.

Centre for BME Health

reducing health inequalities

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