

Report Title	Patient Voice Report	Date of report	13/03/19	Agenda Item	<i>Leave blank for Committee Secretary</i>
Lead Director / Manager	Ian Porter Director of Corporate Services North Central London CCGs	Tel/Email	ian.porter3@nhs.net		
GB Member Sponsor	<p>Kathy Elliott, Lay Governing Body member responsible for Patient and Public Engagement</p> <p>We continue to welcome contributions and support to strengthen patient and public engagement. Since the last Governing Body meeting, highlights have been:</p> <ul style="list-style-type: none"> • My thanks to Simeon Baker, Head of Communications and Engagement who comes to the end of his contract on the 31st March with Fran Mc Neil returning to work from her maternity leave on Monday 8th April. • My thanks to the communications and engagement team who have submitted the evidence required for the patient and community engagement assurance rating for NHS England. It is anticipated that the outcome scores will be disseminated to CCGs in July (2019) and will be presented at a CPPEG operational and/or operational meeting. I also wish to give thanks to Anna Wright and Frances Hasler (Healthwatch Camden) and Allegra Lynch (Camden Carers Service) and many more who have feedback on how we are doing with patient engagement. You can access the feedback by clicking on the following link: stakeholder feedback 2018/19. <p>Moving forward:</p> <p>The following activity is currently planned for March/April 2019:</p> <ul style="list-style-type: none"> ▪ CPPEG operational meeting (11 March) ▪ Citizens Panel higher education health and wellbeing campaign (Jan - March) ▪ PPG Forum Meeting (Thursday 11 April) 				
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Name of Authorising Finance Lead	Not Applicable	Summary of Financial Implications Not Applicable
Report Summary	<p>This paper gives a synopsis of the patient and public engagement activity undertaken since the previous Governing Body meeting.</p> <p>The report is linked to Strategic Objective E, which is part of the CCG's Business Plan: Work jointly with the people and patients of Camden to shape the services we commission.</p>	
Recommendation	The Governing Body is asked to note the content of the report.	
Identified Risks and Risk Management Actions	Not Applicable	
Conflicts of Interest	Not Applicable	
Resource Implications	Not Applicable	
Engagement	Engagement documented in report.	
Equality Impact Analysis	No equality impact assessment is required for this report.	
Report History and Key Decisions	Not Applicable	
Next Steps	Not Applicable	
Appendices	Not Applicable	

The Patient Voice Report (March 2019)

This paper covers work undertaken over the past two months, relating to:

1. Camden Patient and Public Engagement Group (CPPEG)
2. Strategic Objective E as set out in the CCG's Business Plan: Work jointly with the people and patients of Camden to shape the services we commission.

1. Camden Patient & Public Engagement Group (CPPEG)

Since the last Governing Body meeting the CCG has held one CPPEG operational meeting and one CPPEG public meeting. Key themes and issues arising are described below:

1.1 CPPEG operational meeting (14/01/2019)

CCG Committee reports

CPPEG committee representative reports and the Governing Body Patient Voice report were discussed, approved and disseminated to PPGs for information, which can be accessed [here](#).

NHS England consultation on Items which should not routinely be prescribed in primary care: 28/11/18 to 28/02/19

Rachael Clark, Head of Medicines Management and Dr Philip Taylor, GP at Parliament Hill Medical Centre and Governing Body member updated CPPEG on new guidance related to items which should not routinely be prescribed in primary care. The presentation is [here](#). The key messages were:

During 2017/18 CCG guidance was published by NHS England for:

- Items which should not be routinely prescribed in primary care (Nov 2017); and
- Conditions for which over the counter items should not routinely be prescribed in primary care (March 2018)
- **Now – additional consultation** (28 November 2018 until 28 February 2019) - Items which should not routinely be prescribed in primary care: an update and a consultation on further guidance for CCGs

Proposals for new commissioning guidance

Do not initiate in primary care and support de-prescribing	Initiate only after MDT review
<ul style="list-style-type: none">▪ Aliskiren	<ul style="list-style-type: none">▪ Amiodarone

<ul style="list-style-type: none"> ▪ Bath and shower preparations for dry and pruritic skin conditions ▪ Blood glucose testing strips costing >£10 for type 2 diabetes ▪ Needles for insulin pens costing >£5 per 100 ▪ Minocycline for acne ▪ Silk garments 	<ul style="list-style-type: none"> ▪ Dronedarone
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CPPEG members welcomed the update and the opportunity to give feedback to the latest consultation. The PPG members agreed to table the proposals at upcoming PPG members and give feedback back to the Medicines Management Team within the consultation deadline. The consultation would also be disseminated via social media and forwarded to stakeholders for information and comment (e.g. Healthwatch Camden, Camden Disability Action and Voluntary Action Camden).

Primary care - locally commissioned services for 2019 and beyond?

Vanessa Cook, Head of Primary Care, Camden CCG gave an update on the current status in agreeing locally commissioned services for 2019 and beyond in Camden. The presentation is [here](#). The key messages were:

Locally commissioned services: 2019/20 and 2020/21

- Our proposal for investment in locally commissioned services (LCSs) for 2019/20 and 2020/21 has been approved by the CCG's integrated commissioning committee and will be considered by the Governing Body on 16 January.
- The proposal was developed with wide stakeholder input and informed by a range of factors including population need, shared priorities, current LCS performance and potential gaps and system inefficiencies.

In developing the proposal, we were guided by the following objectives:

- Build on the outcome-focused commissioning approaches taken in 2017/18 and 2018/19
- Focus on delivering high quality care and reducing unwarranted variation
- For services to be easily accessible by all Camden patients
- Reduce reliance on, and avoid, activity in secondary care
- Increasingly support and link to the development of integrated care
- Ensure investment links to the achievement of finance and efficiency outcomes
- Align to the Camden Local Care Strategy, NCL STP and national directives

Overview of proposed LCS investment 2019/20 & 2020/21

- The current overall level of financial investment in LCSs is maintained for 2019/20 and 2020/21 (subject to confirmation of CCG financial allocation and approval by the CCG Governing Body).
- Four existing LCS will be re-commissioned with no changes.
- Other existing LCSs will be re-commissioned with activity, payment model and/or contracting model changes. No impact on patients is expected from these changes.
- Changes will be made in relation to enhanced care planning including refining the eligible patient cohort and revising the approach.
- Neighbourhood outcome measures and the approach to target setting methodology will be refined. To help deliver Camden's integrated care model, a number of shared outcome targets for primary and community services will be introduced.
- The CCG will introduce new services which support delivery of improved access, outcomes and QIPP during 2019/20. For example, teledermatology

Locally commissioned service	Change from current LCS	Overview of change
Neighbourhood outcome targets	Yes	Increase funding linked to outcomes and refresh/revise measures
End of life care	Yes	Introduce neighbourhood outcome target
Seasonal influenza	Yes	Move service to neighbourhood outcome target

Anticoagulation (warfarin)	Yes	Expand service and potentially contract with federations
Enhanced care planning	Yes	Refine cohort and introduce single payment
Homelessness	Yes	Refine cohort and revise payments
Asthma service (children and young people)	Yes	Increase payments for reviews
High risk drug monitoring	Yes	Increase number of drugs included in service and revise payments
Prostate cancer	Yes	Contractual change: include service in Universal Offer
IUCD/IUS and contraceptive implants	Yes	Contractual change: public health to commission from 2019/20
ABPMs	No	No change
Anticoagulation (DOAC)	No	No change
Post-operative wound care	No	No change
Childhood immunisations	No	No change
New service(s) which support delivery of improved access, QIPP and outcomes.	New	For example, teledermatology

Next steps

- The CCG will engage with stakeholders as we set the payment rates for individual schemes, within the overall agreed budget and payment models.
- The CCG will engage with stakeholders to refine outcome measures and targets which focus approved resources in the right places and achieve maximum value for public money.
- The CCG will continue to engage practices as commissioners in this work via locality committees.
- Practice views as providers will continue to be represented through the LCS stakeholder group which brings together LMC, GP federation, CPPEG and CCG representatives.
- Practices can have a one-to-one discussion with the primary and community care team if they have any questions or concerns.
- The CCG will meet regularly with the LMC and are available to attend GP federation meetings if members wish.
- The CCG will continue to provide regular updates to the Camden Patient and Public Engagement Group (CPPEG). CPPEG's Chair sits on the LCS stakeholder group

CPPEG members welcomed the presentation and the need for improved access outcomes and delivery of QIPP considering the financial challenge that the CCG was managing and asked that a representative from the Primary Care Team return later in the year; to update CPPEG on delivery of the locally commissioned services and neighbourhood outcome targets delivered to practices.

Moorfields Eye Hospital NHS Foundation Trust (Moorfields City Road Site – potential move to St Pancras Hospital Site)

Katherine Ayers, Head of Communications (Moorfields) gave an update on plans for the potential move to St Pancras Hospital Site. A summary of the presentation is [here](#). The key messages were:

Who is Moorfields?

- Moorfields Eye Hospital is the oldest and one of the largest centres of ophthalmic treatment, teaching and research in the world.
- More than half of UK-based ophthalmologists and many overseas experts received their specialist training at the Trust.
- In collaboration with the UCL Institute of Ophthalmology, we have one of the largest ophthalmic research programmes in the world.
- Moorfields became a foundation trust in 2004, and now has over 20,000 members.

What is Oriel?

- Oriel is Moorfields proposal to build a new facility at the site of St Pancras Hospital in Camden, subject to consultation.

- Subject to approval we would then relocate all services from Moorfields Eye Hospital on City Road and UCL Institute of Ophthalmology on Bath Street in Islington to bring together high quality eye care, leading-edge research and the world's best education in ophthalmology.
- Camden CCG, on behalf of Islington CCG, will be leading a consultation on this proposal in 2019.

Current context

- The current hospital on City Road was built over 100 years ago, at a time when a fundamentally different model of eye care was delivered.
- The hospital has been subject to piecemeal modifications, refurbishments and upgrade works throughout its history.
- Moorfields are by far the largest provider of inpatient and outpatient hospital ophthalmology services in England, over double the size of the second largest ophthalmic provider

The proposal

People's sight matters – 88% people surveyed considered good vision vital for overall health and wellbeing

Sight loss an increasing reality for many people – major eye diseases are expected to increase over next 15 years

Major advances bring new benefits – diagnostics, treatments, information sharing, new ways of working, fewer hospital visits

Planning for the future – current site in City Road outdated and overcrowded, hinders rather than supports innovation

We have an opportunity to build – a new purpose-built centre to improve research, care and patient experience

CPPEG members welcomed the update and asked that representatives from Moorfields present an update at the next CPPEG public meeting to inform local residents on the plans. The overall feedback was supportive of the proposal and members recommended that representatives engage with the local Healthwatch, Camden Disability Action, Visually Impaired Camden as well as Deaf Blind UK to engage with local residents.

Table 2:

You Said	We Did
<p>CPPEG committee reports: Approved.</p> <p>NHS England consultation on Items which should not routinely be prescribed in primary care: 28/11/18 to 28/02/19: CPPEG members welcomed the update and the opportunity to give feedback to NHS England via the Medicines Management Team.</p> <p>Primary care - locally commissioned services for 2019 and beyond? CPPEG members welcomed the update, recognised the need for QIPP and the opportunities to give feedback and invited representatives from the primary care team back to CPPEG to update progress made at the January operational meeting.</p>	<p>Camden CCG has: disseminated reports to PPGs and the public via the patient newsletter, social media and made available on the public website.</p> <p>Camden CCG has: disseminated the presentation and contact details for NHS England and the Medicines Management Team to CPPEG, PPGs, local stakeholders and voluntary groups (e.g. Camden Disability Action, Visibly Impaired Camden and Voluntary Action Camden) giving them the opportunity to give feedback on the updated consultation proposals.</p> <p>Camden CCG has: disseminated the presentation to PPGs via the patient newsletter and social media.</p> <p>The CCG will continue to work with key stakeholders (for example Camden practices and their Federations, Local Medical Committee, Healthwatch Camden, patient representatives, Public Health and others) to develop plans that are robust and achievable.</p> <p>The difference this will make: CPPEG are representative in discussions with stakeholders developing the proposal and business case for LCS ensuring that the patient voice is represented.</p>

<p>Phase 1 review of CNWL adult community services and what happens next: CPPEG members welcomed the update and the aspiration to align community services in the integrated care model.</p> <p>Moorfields Eye Hospital NHS Foundation Trust (Moorfields City Road Site – potential move to St Pancras Hospital Site) CPPEG members welcomed the update and supported the proposals recommending that Moorfields and engage proactively with Camden Disability Action, Visually Impaired Camden and Deaf Blind UK in progressing the proposal.</p>	<p>Camden CCG will: an update from the Community Commissioning Team will be provided after the New Year.</p> <p>Camden CCG has: disseminated the presentation to PPGs and local residents via the patient newsletter and social media.</p> <p>Invited Moorfields to a CPPEG public meeting to inform local residents of the proposal.</p> <p>The difference this will make: CPPEG and local residents are involved at an early stage of proposal ensuring that the patient and local resident voice is heard. .</p>
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1.2 Camden Patient Participation Group Open meeting (12/02/2019)

CPPEG open meetings occur bi-monthly and give an opportunity for members of the public to hear about and engage with the work of the CCG. The December open meeting was attended by 52 members of the public.

Presentation 1: St Pancras Hospital Site Consultation Findings – (Camden & Islington NHS Foundation Trust)

The presentation given by Malcolm McFrederick, St Pancras Transformation Programme Director can be viewed [here](#). The main messages from the presentation were as follows:

Overview of plans

- **Inpatient move** - build a brand new hospital opening in 2022 at Highgate to replace the ageing buildings at St Pancras
- **Integrated Community Mental Health Centres** - building new integrated community mental health centres (Greenland Road Camden and Lowther Road Islington with a third at St Pancras Hospital)
- **St Pancras Hospital site** - redevelopment of the site for NHS services and housing. Land lease and sale of land will fund new inpatient hospital and integrated community mental health centres.
- **An independent organisation evaluated all feedback** and compiled a 'findings' report available at www.islingtonccg.nhs.uk/stpancras

Help design the new hospital – getting involved

- Join the online information and feedback group by emailing communications@candi.nhs.uk

The public attendees welcomed the presentation and the time given to answer questions that were raised from the audience. A number of attendees signed up to assist with helping to design the new hospital building. Concerns were expressed in case the costs of relocation and building a new hospital overrun, assurance was given that financial regulators had reviewed the costings and would continue to do so moving forward.

Presentation 2: Moorfields Eye Hospital – Consultation Programme

Katherine Ayers, Head of Communications (Moorfields) gave an update on the proposed consultation programme plan for Moorfields Eye Hospital. A summary of the presentation is. The presentation is [here](#). The key messages emerging from the CPPEG presentation delivered on the 14 January were:

Potential benefits of a new hospital site

- Brings together eye care, research, education and links to the wider network of care and social support
- Partnership approach will ensure designs around patient needs and informed by communities of residents and professionals
- Would support greater collaboration between patients, clinicians, students and researchers.

Benefits for residents, patients and carers	Benefits for staff	Benefits for future research	Benefits for training and education	Benefits for the NHS
<p>Improved, easier & more comfortable patient experience.</p> <p>Better access to high quality care. Improved care pathways</p>	<p>Better working environment to deliver best care.</p> <p>Attractive workplace will improve recruitment and retention.</p> <p>New pathways offer new job opportunities and career progression</p>	<p>New facilities would broaden scope and scale of research.</p> <p>Attractive to top talent.</p> <p>Research translated more easily into patient care.</p> <p>Patients to join clinical trials.</p>	<p>Teaching facilities alongside UCL and service delivery would enhance and expand education and training.</p> <p>Supports workforce development to meet future demands.</p>	<p>Greater operating efficiency to meet increasing demands.</p> <p>Support to developments in primary and social care.</p>

What comes next?

- A dedicated website and podcasts will help to publish and coordinate the many opportunities and channels for involvement and feedback.

Opportunities to get involved will be provided moving forward:

- Open workshops for deliberative discussion
- Deeper-dive discussions on the key themes
- Proactive discussions with protected groups
- Discussions at regular and existing forums
- Advisory Group to advise and challenge the involvement and consultation process
- Service user and carer experts to work closely with design team and other work streams

The public attendees welcomed the presentation and being informed at an early stage for the plans to move to another hospital site. Attendees welcomed the case for change and asked that transport links are taken into consideration (wayfinding from tube and train stations were suggested as challenges for people with disabilities and sensory impairments).

Presentation 3: Camden Mental Health Crisis Café - Pilot

The presentation was given Helena Quinn, Mental Health Commissioning Manager (London Borough of Camden & NHS Camden CCG). The presentation is [here](#). The key message were as follows:

Why a crisis café?

- We are aware that there are few mental health building based services open outside of Monday – Friday 9am-5pm
- This means people are turning to A&E or London Ambulance when experiencing a mental health crisis outside of these times
- A local mental health crisis café, operating in the evenings and at weekends, would provide a more suitable environment to get help in a crisis

What is a crisis café?

- Offers a non-medicalised, warm, welcoming and supportive environment
- People are met at the door by a member of staff and have instant access to mental health support
- Staff are able to spend more time with people
- Opportunity to meet with others with similar experiences who understand

The Camden service offer – for those presenting in Camden, it would provide

- Brief, immediate support in a non-medicalised, safe environment
- A listening ear, a hot cup of tea and peer support
- A background crisis team presence & integrated IT
- Befriending & activities so people not just sitting
- Opportunities to volunteer
- Support for people to access appropriate services

- Practical support
- We aim for the service to be operating in October 2019.

Public attendees welcomed the proposal and supported the principle for supporting vulnerable patients outside of routine office hours (Monday – Friday (9am – 5pm). The presenter was asked to note that location for the service was key (close to UCLH A&E was recommended) and that consideration was given to how the service would continue after the pilot ended. The initial concept is to pilot the service for 2 services with an option of continuing for an additional two years.

The attendees supported the topics listed and welcomed updates to be presented at future public meetings as well as the PPG forum meetings in 2019.

Table 2:

You Said	We Did
<p>Presentation 1: St Pancras Hospital Site Consultation Findings – (Camden & Islington NHS Foundation Trust) The public attendees welcomed the presentation and the opportunity to discuss the findings. The audience supported the future steps and asked that the budget was kept into the agreed limit to not affect future care. The public also supported the plan to ensure that part of the housing would be made affordable for NHS staff.</p> <p>Presentation 2: Moorfields Eye Hospital – Consultation Programme The public welcomed the update and the opportunity to be involved at an early stage. Attendees also asked that transport links are taken into consideration (wayfinding from tube and train stations were suggested as challenges for people with disabilities and sensory impairments.</p> <p>Presentation 3 Camden Mental Health Crisis Café - Pilot: Attendees welcomed the plan to offer a service to support vulnerable people in un social hours. Concerns were expressed if the service was not continued after the pilot period ended but understood that evidence needed to show that the service worked and reduced the flow of patients to A&E.</p>	<p>Camden CCG has: disseminated the presentation to the public via the patient newsletter, public website and social media.</p> <p>Camden CCG will: continue to support C&I NHS Foundation Trust by ensuring that the public are kept up to date in relation to involvement opportunities and financial management of the new build is secure.</p> <p>Camden CCG has: disseminated the presentation to the public via the patient newsletter, public website and social media. Representatives from Camden Disability Action, Visually Impaired Camden and Voluntary Action Camden have also been introduced to Moorfields staff to establish early working relationships to ensure that local people are involved in proposal.</p> <p>Camden CCG and PPGs will: continue to promote the consultation programme to the public to ensure that the opportunity to be involved is continued</p> <p>The difference that this makes: Local patients will have the opportunity to prevent and manage their conditions better.</p> <p>Camden CCG has: disseminated the presentation to the public via the patient newsletter, public website and social media.</p> <p>The difference this will make: Patients have offered to help with the design of the service and contact details were exchanged to ensure that the service could be co-designed.</p>

2. Business Plan Objective E: Work jointly with the people and patients of Camden to shape the services we commission

The following summarises other key engagement activity undertaken by the CCG over the last two months to support Objective E:

NHS England – submission of evidence for Patient and Community Engagement

The communications and engagement team are collating evidence to be submitted to NHS England by 8th March 2019 for the assurance rating. The information to be submitted is aligned to five domains:

- A Governance
- B Annual Reporting
- C Day to Day Practice
- D Feedback and evaluation
- E Equalities and health inequalities

CCG 360 Stakeholder Survey

The communications and engagement team are facilitating the survey for Camden and the response rate with one week before the fieldwork ends (Thursday 28 February) stands at 60% with the national response rate standing at 51%.

Deaf Awareness Training

The communications and engagement team facilitated four deaf awareness training workshops for CCG and general practice staff (clinical and non-clinical) during January and February. 20 people attended the training sessions. Additional workshops will be held in general practices over the next 12 months. The topics the workshops covered and the learning outcomes are listed in the table below:

What the training workshops covered	Learning outcomes
<ul style="list-style-type: none"> • Terminology to describe deafness • Hearing loss facts and statistics • Communication tips & accessible technology • Introduction to British Sign Language (BSL) fingerspelling alphabet • Fingerspelling alphabet exercises • Introduction to British Sign Language skills • Basic British Sign Language skill exercises • Lip-reading test • Working with or booking BSL interpreters 	<ul style="list-style-type: none"> • Build up confidence to talk to deaf people directly. • A basic understanding of deafness and acceptable terminology. • Ability to use basic everyday signs and clear lip-reading skills. • To be aware of technology and services available to meet deaf and hard of hearing client's needs. • How to work with a BSL Interpreter

Citizens Panel (CP)

The 2018-2019 financial year is the third year that MES have supported NHS Camden CCG with the Citizens' Panel after originally being commissioned in 2016. The communications and engagement team took over management of the Citizens' Panel in June 2018 from the Transformation, Planning and Delivery Directorate. Currently there are 1099 panel members and was recruited to, as closely as possible, reflect the diverse community of the borough of Camden. (Demographic data held by MES and Camden CCG C&E Team)

Activity and engagement with the panel has been consistent but it has been decided, in the current financial situation, to not renew the contract with MES for a fourth year (this means that the contract and associated activity terminates on the 31 March 2019).

Equalities Impact: The plan (joint between communications and engagement and equality and diversity leads) to engage proactively with groups under the protected characteristics means that there is no risk to the CCG under pre-engagement and public consultation responsibilities. Any future service commissioning decisions will as routine continue to be taken after the completion of an Equalities Impact Assessment for that particular service. Camden CCG holds and owns the data of all panel members and will extend engagement opportunities with panel members post March 2019. Members are now invited to CPPEG engagement meetings as a matter of course (since November 2018).

Higher Education Health and Wellbeing Campaign: Using the remaining funds that Camden CCG has with MES it was decided to focus on the health and wellbeing of Camden's extensive student population with the following main aims:

- Avoiding unnecessary A&E admissions
- Supporting students to access the right service
- Working with universities to better support their students on mental, physical and sexual health
- Promote GP registration (when joining) and GP de-registration (when leaving)

We are working with four universities – UCL, University of the Arts, University of London and Birkbeck, with events, social media, communications and engagement activities.

Accessible Information Standard (AIS)

An article is scheduled to be published in Pulse highlighting the collaboration between Healthwatch Camden, General Practice, LMC and the CCG working together to improving access and information for patients. The article will focus on how Prince of Wales Medical Centre worked with Healthwatch Camden to improve compliance with the Accessible Information Standard.

Camden Inter-Great Simulation Event (31 January)

The communications and engagement team supported the event which was run in parallel with other CCGs in North Central London who hosted similar workshops. A number of PPG members from CPPEG attended to represent the patient voice in addition to two local authority councillors and a representative from Healthwatch Camden.

The purpose of the Inter-Great-simulation was as a vehicle for learning and was designed to give insight into how integrated care might work in practice across health and social care providers in Camden and the wider North Central London area.

Primary Care Procurements

The communications and engagement team are supporting the primary care team in recruiting patients to assist with procurements in relation to:

- Brunswick Medical Centre (contract to provide general practice services)
- Camden Health Improvement Practice (contract to provide general practice services)

Recruiting workshop participants - Adult Elective Orthopaedic Services Review

The next stage of the review is to finalise the service model and develop a process for an options appraisal that will help to decide how and where services might be delivered in the future. The communications and engagement team are supporting the North London Partners team in recruiting patients to attend workshops to:

- review the feedback from our engagement phase and help us to prioritise what is most important in the future of this service
- help test the final service model
- be part of shaping our options appraisal process

Launch of Rainbow Lanyard (19 Feb)

The communications and engagement team supported the HR team in hosting the launch of the Rainbow Lanyard at Camden CCG in parallel with CCG's across North Central London. The purpose of the launch is to demonstrate that we lead in showing an open and visible commitment to building Lesbian, Gay, Bi-sexual and Transgender (LGBT) equality within work and making us a LGBT inclusive organisation. We believe it's important for us to be explicit about our commitment to advancing LGBT equality and send a clear message to our staff, Governing Body members and any organisations that we commission services from that prejudice and discrimination towards LGBT staff is unacceptable.

3.0 Looking ahead

The following activity is currently planned for March/April 2019:

- CPPEG operational meeting (11 March)
- Citizens Panel higher education health and wellbeing campaign (Jan - March)
- PPG Forum Meeting (Thursday 11 April)