

## **ANNUAL REPRESENTATIVE CONFERENCE 6-7 MARCH 2017 MOTIONS FOR DEBATE**

The Agenda Committee agreed 27 Motions to appear on the ARC Agenda.

### **STRATEGIC OBJECTIVE 1: PUT PHYSIOTHERAPY AT THE LEADING EDGE OF TRANSFORMING HEALTH AND SOCIAL CARE**

#### **Motion 1: Women's Health**

Conference recognises the prevalence of chronic pelvic pain in Primary Care with data indicating comparable incidence to asthma, migraine or back pain. Similar allocation of funding is therefore needed and should fund nationwide the development of local Multidisciplinary Team services or identify tertiary specialist centres that patients can be directed to.

Women experiencing pelvic pain undergo many unnecessary investigations and in the case of chronic pelvic pain it carries a heavy economic and social burden.

Appropriate referral to a Multidisciplinary Team, including the specialist physiotherapist with pain expertise, provides accurate assessment and diagnosis often leading to effective management avoiding the common scenario of prolonged inappropriate treatment and even surgery. Patients should not be discriminated against due to the chronic hidden nature of the condition.

Conference calls on the Society to work with Pelvic Obstetric Gynaecological Physiotherapy to highlight to the National Health Service through the NHS improvements connection, the inconsistencies of services available throughout the United Kingdom and the cost benefit and patient satisfaction, that referral to a specialist Multidisciplinary Team, provides. Speedy access to such services would avoid unnecessary and costly investigations and inappropriate management.

#### **Pelvic, Obstetric and Gynaecological Physiotherapy (POGP)**

#### **Motion 2: So your next Patient has a Mental Health issue**

The Mental Health Foundation estimates that one in four people in the UK experienced a mental health problem in the last year. These issues are a major cause of disease burden and disability – more than that of heart disease and cancer. There is a strong link between physical and mental health, so physiotherapy staff in a wide variety of settings in health and social care treat patients with mental health concerns. Physiotherapists have opportunities to empower patients to improve both their physical and mental well-being. Due to packed curriculum, education in mental health is limited for undergraduates, and qualified clinicians working in specialities require improved support and training to be more effective. Conference welcomes recent guidance documents “so your next patient has...” aiming to support members practise in areas which are less familiar to them. Conference calls on the CSP to:

- Develop a guidance document “so your next patient has a mental health issue”
- Promote the value of including key areas of understanding for mental health in the undergraduate / postgraduate curricula
- Explore the development of an e-learning module on recognising key issues of mental health in the general population and how to signpost and support them

#### **Stewards and Safety Representatives Scotland**

## **EMERGENCY MOTION 4: STP's**

The recent February Publication By the Kings Fund "Delivering Sustainability and Transformation Plans" states that some of the biggest challenges, but the highest priority in terms of influencing the success of STP's, will be the proposals to develop new care models and transforming the services in the community.

Conference calls on The CSP to oppose the plans in their current format. Following the publication now of all 44 STPs we can see how most fail to provide any detail on this very important aspect of the plans. The majority of the plans have no mention of physiotherapy, the role of therapy and rehabilitation. A profession that could be seen as pivotal in the successful delivery of STP's!!!

### **East Midland Stewards**

#### **Motion 3: UK Physiotherapy Day**

Occupational Therapy week: 7-13th November, National Teachers' day: 5th October, National Nurses day: 12th May. All dates occur to celebrate and promote each profession. Our American counterparts promote their importance and skills through Physical Therapist day on the 8th September. However, there is not to date a UK Physiotherapy Day. With present challenges such as recruitment and retention, lack of university places, and a general lack of public understanding of the role of Physiotherapy, it would be hugely beneficial to raise awareness about the crucial contribution our profession makes with 'Physiotherapy Day'. Conference therefore asks the CSP to organise and promote a UK Physiotherapy Day from 2017 onwards.

### **South Central Stewards and Safety Representatives**

#### **Motion 4: Children's Mental Health Services**

Conference commends the CSP on continuing to use every opportunity to highlight the chronic underfunding of the NHS and the impact that has on our members

However, NHS underfunding is more pronounced in some areas than others – and in particular in Child and Adolescent mental health (CAMHs) has a historic legacy of underfunding and neglect.

Mental health services in total receives less than 1/10th of the NHS budget and CAMHs only a portion of that. Yet in the UK 1 in 10 young people will experience problems with mental health and suicide remains the leading cause of death in young people. In Northern Ireland those figures are more pronounced as it is estimated that between 20 and 30% of children in NI will develop mental health problems before reaching their 18th birthday.

We urge the CSP to continue to use every opportunity to highlight the need for more funding for the NHS but to pay particular attention to the funding for this chronically under resourced area. It may impact on very few physiotherapists directly but it will have a huge impact on the communities in which we live and work and on the future provision of health care.

### **Northern Ireland Stewards**

## **STRATEGIC OBJECTIVE 2: CHAMPION THE DEVELOPMENT AND USE OF THE EVIDENCE THAT PHYSIOTHERAPY IS BOTH CLINICALLY & COST EFFECTIVE**

#### **Motion 5: Caps on Treatment Sessions**

Conference notes that an increasing number of CCGs are commissioning outpatient MSK physiotherapy services for a limited number of appointments. As qualified professionals we have autonomy in the treatments that we offer and as such should we also not have autonomy over the number of treatment sessions that are required or beneficial.

We urge the CSP to research this issue to find out where CCGs get the magic 6/5/4/3 sessions from and promote further autonomy for our members.

### **South East Coast Stewards**

#### **Motion 6: Evidence base of Ultrasound**

We believe that the use of ultra sound within the profession and possibly at student levels are being under used due to lack of evidence of the benefits or the cost of such treatment.

We would ask the CSP to use the networks developed within the CSP County wide to gather evidence of the use of ultra sound as a form of treatment and whether there is lack of use due to evidence or cost implications of the equipment.

Linking in with the corporate strategy in the use of evidence that physiotherapy is both clinically and cost effective in the planning of commissioning and delivering the best treatments for the public.

### **Welsh Stewards**

## **STRATEGIC OBJECTIVE 3: FULFIL THE POTENTIAL OF PHYSIOTHERAPY TO EMPOWER PATIENTS AND COMMUNITIES**

#### **Motion 7: Dementia**

There are currently 850,000 people in the UK living with a diagnosis of Dementia, the figure in Wales stands at over 45,000. People with Dementia and their families/carers experience detrimental use of language in relation to their experience of Dementia, the use of such language perpetuates the stigma that exists in relation to this complex condition.

The Dementia Engagement and Empowerment Project (DEEP) and Dementia Words Matter campaign identifies words and phrases that people with Dementia find insulting or damaging and suggests more suitable alternatives. For example 'person with Dementia' not 'sufferer or victim', 'walking' not 'wandering', 'symptoms of dementia' not 'demented'. It is believed that by endorsing this campaign and signing up to a list of like-minded organisations, the CSP can be leaders in ensuring that members are promoting the use of correct language when working with those affected by Dementia thereby positively influencing their quality of life.

Conference calls on the CSP to join with the Dementia Engagement and Empowerment Project (DEEP) and endorse their 'Dementia Words Matter campaign'.

### **Welsh Board**

## **Motion 8: Physiotherapy and Vulnerable Populations**

During this time of austerity and welfare cuts, homelessness is increasing. In the 2nd quarter of 2016 there was a rise of 10% of households registered as homeless compared to the year before. The CSP has recognised the seriousness of this issue by highlighting the topic in Frontline.

Homeless people suffer a high incidence of physical health problems, which physiotherapists can help to manage. An audit of homeless people's health needs found 78% of respondents reported physical health problems, approximately half of which were musculoskeletal. We anticipate that musculoskeletal disorders will be more serious and more common amongst homeless people because they under-report compared to housed people.

Homeless people find accessing health services difficult. Barriers include: logistical problems reaching clinics, a need for GP registration and the need for an address to send appointments to. Consequently, they miss out on early interventions, and can present with more advanced and complex problems. This can compromise their health, and potentially increase societal costs.

Conference requests the CSP to produce specific guidance for members working in clinical practice, commissioners and educators, on how to better facilitate access to physiotherapy amongst vulnerable populations, including homeless people.

## **National Group of Regional Stewards and North West Stewards & Safety Reps**

### **EMERGENCY MOTION 3: Reinstatement of the Dubs Amendment**

Conference is horrified at the change in Government policy on 8<sup>th</sup> February towards ensuring sanctuary for unaccompanied refugee children to the UK. The Dubs amendment was agreed by the then Prime Minister David Cameron to offer safe refuge to 3,000 children as the scale of the refugee crisis and their plight escalated. To date it is estimated that only 350 children have come to the UK through this scheme and now it has been shelved. As a society we have a duty to provide support and a safe haven to those most vulnerable children. As a key healthcare professional body we should stand by our values and take a leading role in calling for the reinstatement of the Dubs amendment.

Conference therefore calls on the CSP to join with the wide spectrum of voices in condemning this u-turn and call for the reinstatement of this scheme.

North East Stewards

## **Motion 9: Exercise Advice in GP Surgeries**

Conference is aware that prevention is key and that inactivity / sedentary behaviour is associated with poor health at all ages. It is one of the ten most important risk factors in England.

Physical activity helps to prevent and manage over 20 chronic conditions. However, 2013-14 data collected by Clinical commissioning groups highlighted that physical inactivity was costing the NHS £455m a year.

Work Out at Work promotes physical activity for those in work, but individuals who don't work and spend the majority of their time at home, leading sedentary life styles are a population that needs addressing.

Waiting Room Information Services claim that leaflets, posters and samples it distributes can reach 38 million patients in 6,000 surgeries and pharmacies across Britain. The audience in waiting rooms is captive with patients spending between 10–20 minutes there. Conference calls on the CSP to produce a down loadable digital and printable waiting room advertisement to be displayed in GP Surgeries / A&E waiting rooms:

- Highlighting the danger of sedentary behaviour in the home.
- Examples of how to break up prolonged bouts of sedentary behaviour
- Exercises that can be incorporated within prolonged bouts of time spent sedentary in the home.

## **Student Executive Committee**

### **Motion 10: Exercise at Work**

Evidence supports freeing staff for periods of their paid working day to exercise. Organisations benefit in terms of happier, energised staff and higher quality of care, whilst not losing productivity. Benefits to staff and organisations outweigh cost of invested time.

The Royal College of Physicians recently reported that investing in staff's health and wellbeing, positive improvements could result in:

- Patient safety and experience
- Service costs
- Productivity
- Staff self-worth and satisfaction

Conference calls on CSP to start a national campaign, promoting the benefits of organisations/businesses freeing up their staff time in their paid working day to exercise.

## **Scottish Board**

### **Motion 11: Community Equipment**

Conference calls upon the CSP to investigate and highlight the concerns surrounding community equipment providers and the impact the physiotherapy services they support. As the role of physiotherapy is vital in the community with ever extending links towards admission avoidance and supporting hospital discharges, it is becoming apparent that private providers are charging extortionate delivery charges for same day and next day delivery. In one trust, the private equipment provider charges £25 for each item requiring same day delivery, £20 for next day delivery per item. Same day delivery requests have to be authorised before midday, with next day authorised before 4pm. With providers not providing a 7-day service, the costs relating to this can be considerable. Take an example of admission avoidance on a Thursday evening: If a hospital bed, 2x glidesheets, mattress, rotunda and glide about commode were assessed, this would cost the trust £125 in delivery fees to provide the equipment which is essential to avoid hospital admission the next day. Such contracts are won on the pretence of providing equipment at lower costs, however delivery costs and time frames do not appear to be taken into consideration.

## **South Central Stewards and Safety Representatives**

## **STRATEGIC OBJECTIVE 4: REPRESENT THE INTEREST OF MEMBERS AT WORK**

### **EMERGENCY MOTION 2: Protection of the NHS in UK/US Trade Deals**

Since the change in administration in USA and recent visit of the UK Prime Minister Theresa May, Conference notes with some concern the recent indications that the UK is seeking to develop new trade deals. Whilst we realise that such negotiations and agreements are vital to the future UK economy, there is a real risk to the future sustainability of our NHS if it is not protected from large multinationals selecting to cherry pick profitable services. This in turn could lead to privatisation of the NHS by the back door and exposure to a litigious culture, which could further undermine the integrity of the NHS.

Conference calls on the CSP to work with the TUC, other health unions and professional bodies to lobby the government and MPs to ensure the protection of the NHS from any UK/US trade deals.

### **National Group of Regional Stewards**

#### **Motion 12: Stress Management at Work**

Conference notes that increasingly resilience training for staff is being introduced in many NHS Trusts as a stress management tool. Conference is concerned that this approach may be used instead of adequately addressing the organisational causes of stress through development of good practice and measures to tackle the causes of workplace stress.

Conference calls upon the CSP to raise these concerns within the appropriate NHS partnership structures at a national and regional level, with a view to jointly promoting the importance of the utilisation of the HSE stress management standards within NHS organisations, particularly during the current climate of structural change and financial constraint.

### **National Group of Regional Safety Representatives**

#### **Motion 13: Disclosing Disability**

A recent survey of disabled people noted that nearly half of the respondents – 47% would not feel confident disclosing their disability when applying for a new job. This figure was even higher for participants with a mental health condition.

We also know, from work by the CSP and others, that even when a disability has been declared employees often have difficulty negotiating and implementing reasonable adjustments within a suitable timeframe. Members may feel equally reticent about disclosing their disability to the CSP.

Without good quality, accurate data however the CSP and the disabled members' network cannot work to its full capacity to support members in the workplace.

Conference therefore asks the CSP to:

- a. publicise appropriate resources from the CSP and elsewhere on negotiating reasonable adjustments in the workplace; and
- b. collate a suite of case studies demonstrating how CSP members with a range of impairments can work successfully within physiotherapy

### **Disabled Members' Network**

## **Motion 14: Ageing Workforce**

The older population is an important and growing segment of our nation. Increased life expectancy is something that we should celebrate, but greater longevity means that we need to plan ahead to ensure that society and the individual benefits from a longer life. The number of workers in the NHS aged 50 or older is expected to grow, this could pose significant employment challenges in the near future. In order to maintain an adequate supply of skilled workers at all levels whilst meeting an increased demand for high-quality health care services, employers need to rethink their employment policies and practices to retain talented older staff.

The physiotherapy profession is well placed to support active ageing. Many NHS Trusts already have workforce strategies in place that emphasise the retention of senior staff members in their preferred job roles as they have the necessary experience and skills, however, this is not the case for all trusts.

This conference calls upon the CSP to promote local workforce strategies that seek to retain the skills of older staff by lobbying nationally and encouraging stewards and members to share good practice and raise the issue locally.

### **London North Stewards**

## **Motion 15: NHS Funding**

Conference condemns the government for its strangulation of the NHS by insufficient resources. Despite a promise of an increase in real terms funding, demand continues to outstrip supply. With the aging population and the associated health challenges and a worsening provision of social care, the strain on the NHS will only grow. With these changing needs of the population, the NHS also needs a workforce that can reflect that and provide best value, quality services.

From the OECD Health Data 2015, the UK spends a smaller proportion of its GDP on health care than countries such as Portugal, France and Germany.

Conference calls on the CSP:

- To campaign with other trade unions, relevant user groups, stakeholders and political parties as appropriate, for a properly funded NHS
- To work with the other health unions to co-ordinate making a clear case for an increase in the %GDP spent on both the NHS and social care services,
- To work with other unions to develop a more detailed workforce strategy that would support the changing needs of the NHS across the UK, recognising the differences between the countries.

### **National Group of Regional Stewards**

## **Motion 16: Fertility Treatment**

Fertility treatment success rates range between 2% and 33% in the UK. Some individuals will require multiple attempts at treatment, however with 1 in 4 pregnancies ending in miscarriage and 75% of these occurring in the first trimester, members can find themselves caught between maternity and sickness absence policies. In some trusts, treatment is considered an outpatient appointment and therefore not covered by sickness absence policies therefore triggering more formal difficulties with absence.

Conference, we are aware that other trusts do have a specific policy on fertility treatment, allowing five paid days off if required.

Where this is not implemented or recognised as good practice by management, members are being unfairly penalized in the workplace by having to instead take sick leave or annual leave. This can be especially hard at a challenging and stressful time.

We call on the CSP to collate data through the steward network of existing best practice in order to establish a fair approach for all members. We ask the CSP to help work with NHS and other health employers to promote good practice in this area, raising awareness to the wider membership.

### **South West North stewards**

#### **Motion 17: Domestic Violence among NHS staff**

This Conference is extremely concerned by the continued increase in the numbers of NHS staff and therefore our members that are victims of domestic violence each year. Our members value the CSP contributions to their working environment and often view work as a sanctuary. However our managers may feel that they do not have the skills required to adequately identify or support staff suffering with domestic violence because they may not know the patterns of sick-leave and behaviour that comes as a result of violence in the home. Managers may also have a lack of awareness of the extent of this important issue due to the lack of reported incidence locally and nationally.

This conference calls on the CSP to:

- a. Raise awareness of this issue among managers and members.
- b. Encourage stewards and safety reps to raise it locally through joint partnership working and promote the development of appropriate workplace policies.

### **National Group of Regional Safety Representatives**

#### **Motion 18: Skill Mix Concerns**

Conference is concerned that, as a consequence of the dire financial situation facing the NHS, some Trusts are using this as an opportunity to consider replacing some of their band 5 registered positions with unregistered band 4 positions.

Whilst the development of appropriate assistant practitioner roles can be extremely valuable this should not be at the expense of registered posts.

Conference calls upon the CSP:

- a. to investigate the extent to which this is occurring due to financial restraints; and
- b. to raise the issue nationally and regionally with NHS Employers if this is shown to be an issue.

### **East Midlands Stewards and Safety Representatives**

#### **Motion 19: EU Physiotherapy Students**

Conference welcomes the CSP involvement in the Cavendish Coalition, which is a group of health and care organisations coming together to provide support and guidance as we prepare to exit the EU. Part of the Cavendish Coalition's work is to campaign for the right of EU staff to remain in the UK post-Brexit.

However, there are other issues to also be considered.

The successful ER-WCPT conference last November shows the importance of working with Physiotherapy colleagues across the EU, which for some members will mean working in other EU countries. Whether this can happen post-Brexit is uncertain.

We also have EU students attending our Physiotherapy courses, but whether they will be allowed to work in the UK post-qualification is also unclear. Given that the numbers of students qualifying is insufficient for the demand, this could have a devastating impact on our workforce.

Therefore, we call on the CSP to also campaign for EU Physiotherapy students training in the UK to be allowed to remain post-qualification.

### **National Group of Regional Stewards**

#### **Motion 20: Electronic Patient Records**

Electronic Notes are becoming commonplace in the UK healthcare system. This is a welcome move in many areas of physiotherapy, however this change is presenting new risks and challenges.

In many parts of the UK, NHS services are run in merged trusts or physiotherapists are providing NHS services as employees of private healthcare companies.

The non-NHS companies do not have full access to NHS systems however electronic systems are becoming the sole way physiotherapists access patient records. Computer contracts also change meaning previous records held online are lost. Physiotherapists are being put at risk as they are unable to see what other treatments and investigations their patients have had, either in a current system or in previous episodes of care.

The conference requests that the CSP supports members by:

- working across all four countries of the UK to gather issues where electronic notes are preventing high quality physiotherapy intervention; and
- raising awareness of these issues to members and managers, to ensure problems during transitions of electronic notes can be avoided.

### **West Midlands Stewards**

#### **STRATEGIC OBJECTIVE 5**

#### **HELP PHYSIOTHERAPY NETWORKS AND COMMUNITIES ORGANISE**

#### **Motion 21: Hope not hate**

Conference is extremely concerned at the reported rise in racial, religious and LGBT hate crimes within the UK following the Brexit vote. In September 2016, the National Police Chiefs' Council released figures which showed the number of incidents rose by 58 per cent in the week following the vote to leave the EU.

The CSP is a diverse member organisation and our members treat a diverse population of patients. We appreciate the work that members of the CSP, the Industrial Relations Committee, CSP council and the CSP Leadership Team carried out supporting the Stonewall #NoBystanders campaign in 2015.

We ask the CSP to affirm its commitment and support for members and patients suffering hate crimes through:

- affiliating to an organisation fighting racism and hate crime such as Hope Not Hate;
- forming closer links with Stonewall and promoting their campaigns more widely to the CSP membership;
- developing a short resource to be available to CSP members to support and signpost patients who may have been a victim of hate crime; and
- updating materials that promote the CSP diversity networks, and highlighting the peer support available to CSP members through these groups.

### **Lesbian, Gay, Bisexual and Transgender Network Group**

#### **Motion 22: Bed closures**

This conference is aware of proposals to close significant numbers of hospital beds in Devon and recognises the likelihood that bed closures will also be proposed elsewhere. Reducing length of stay, decreasing admissions are all to the benefit of patients, however to achieve this there will be a need to increase social care to prevent the remaining beds being filled by patients unable to leave because of social pressures. There are also concerns that CSP members will end up being generic therapy workers responding to problems created by bed closures, rather than focusing on falls prevention etc.

Conference calls upon the CSP to:

- support stewards, managers and members locally to assess the potential impact on both the service and members when hospital bed closures are proposed and to respond accordingly, promoting the role of physiotherapy;
- support local physiotherapy services to campaign to ensure that therapists are integral to any plans to move away from hospital based care and into the community, and provide the necessary support to members who may be expected to change job role; and
- campaign nationally and locally to increase social care provision to ensure services are able to cope with the closure of hospital beds.

#### **South West South Stewards**

#### **Motion 23: Loss of Rehabilitation Facilities**

We know that physiotherapy rehabilitation is clinically cost effective to enable patients to maximise their functional outcomes. As the balance of care in health and social care provision shifts from acute to community settings, Conference is concerned that the ability of members to deliver effective rehabilitation is being eroded. In order to increase patient flow in acute hospitals, assessment and discharge are the priorities and rehabilitation is viewed as a luxury. Community rehabilitation beds are being closed down to achieve savings targets, gym spaces being converted into non physiotherapy areas and members are struggling to deliver rehab with inadequate resources in less than ideal environments. Conference is concerned that the value of rehabilitation is being lost. This has, in turn, the potential to increase the burden on society as patients do not reach their full capability.

Conference calls on the CSP to:

- oppose cuts to rehabilitation facilities wherever they are proposed (both to staffing and environmental resources); and
- Campaign with the banner “No Rehab No Way”.

### **Stewards and Safety Representatives Scotland**

#### **Motion 24: Practice Educators**

Conference calls on the CSP to pilot a scheme for senior practice educators to mentor newly qualified band 5 physios in becoming practice educators.

Many band 5 physiotherapists do not feel they have the confidence or skill set to become practice educators. However, with some initial support there is no reason they could not do the job fantastically well.

Assisting more band 5s to become practice educators would benefit the students as they will have educators who will have more recent experience of what they are going through. It could also provide CPD for existing practice educators as the newly qualified physiotherapists will bring new skills and enthusiasm which could help practicing educators potentially see situations in a new light.

Currently, many universities struggle to secure placements for their students. With the recent funding changes announced, there will hopefully be an increase in the number of physiotherapy students which makes this issue even more important. The CSP are doing work in highlighting and promoting the expansion of the number and types of placements available. Therefore, promoting a system of mentoring band 5 physiotherapists to become practice educators would be a logical and important next step for the CSP to pilot.

### **Student Executive Committee**

## **STRATEGIC OBJECTIVE 6**

### **BUILD LIFE-LONG RELATIONSHIPS WITH MEMBERS**

#### **Motion 25: What’s in a name?**

We are aware that the CSP is undergoing work looking at expanding the membership within the CSP to other professions e.g. physical instructors, sport massage therapies, cardiac physical instructors, generic therapist etc.

We are asking the CSP to explore openly the use of no longer using the words ‘support worker’ as we believe it is no longer fit for purpose. The wording support worker does not describe the diverse workforce within the NHS or private sector. With the expansion of the different avenues of delivering health care this is opportunity to explore a more meaningful and respectful way of addressing the associate membership or any further expansion on the membership within the CSP.

We believe that this is an opportunity to open up the associate membership and have a more inclusive membership within the CSP. The word support worker does not fit with the professional image that we believe the CSP is developing in its current strategy.

### **Associates Committee**

### **Motion 26: ARC**

How relevant and legitimate is ARC? ARC is described as an opportunity for members to have their say and influence CSP policies and direction, yet only a fraction of members are able to participate and vote on these important discussions.

Conference is concerned that only around 250 members attend ARC which represents a very small proportion of the 52,000 CSP members. ARC may therefore not be truly representative of the thoughts and feelings of the full membership.

Conference seeks a review to whether ARC is relevant in its current format as a legitimate process for our members.

(ARC attendances:

2013: 249

2014: 247

2015; 252

2016: 239.)

### **Association of Chartered Paediatric Physiotherapists**

#### **Motion 27: Frontline Opt-in**

The Conference believes, in this time of austerity and to ensure best value of subscription fees for members, that Frontline magazine is an expensive cost. Households often have multiple CSP members living within them who each individually receive a copy of Frontline magazine. This is causing unnecessary waste as copies of the magazine are often thrown away without even being opened. We therefore call on the CSP to make the receipt of a printed copy of Frontline magazine an opt-in service and the process for this simplified.

#### **London South Stewards**

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