Annual Review
2015 – 2016
Working together for prevention
Nurses and other health personnel from around the world engaged with by C3

January 2016
NCDs included in the Sustainable Development Goals (SDGs)

187
C3 International Breakfast Seminar attendees

375
Nursing students engaged with by C3

15
presentations by C3 in 7 countries

2,526
people in C3’s global network

900
Health screenings enabled

3,000
Nurses and other health personnel from around the world engaged with by C3

4,143
followers of C3’s Twitter accounts
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Acknowledgements

Particular thanks are due to Garth Stewart for the design and setting of this Annual Review.
Director’s report

The great news of 2015 is the inclusion of NCDs in the UN’s Sustainable Development Goals.

We at C3 Collaborating for Health live by our name: we believe strongly that the world will only tackle the causes of illness, disability, and the consequent unemployment, poverty, and escalating costs of health care by involving all of society. Too many policies suggest that, with education, individuals will change their unhealthy behaviour. The reality is that people at most risk of ill-health live in the most challenging environments, and education alone is not sufficient: progress on smoking cessation and obesity tends to be greatest among the better-off, with worsening risks in the poorest communities.

C3 continues to network across many sectors: helping London teenagers get their messages through to the CEO of local councils; launching a new international Scorecard on NCDs; and engaging European professionals through a digital health and behaviour change network. The great news of 2015 is the inclusion of NCDs in the UN’s Sustainable Development Goals.

My personal thanks to our founding Board members as they hand over to new trustees – and a warm welcome to these new members. The C3 team looks forward to their support and challenge as we develop exciting new programmes in the coming year.

In June 2015 C3 made the big move across the River Thames (and our thanks to Novo Nordisk for its support in providing our Oxford Circus office for our first few years). We welcome visitors to Borough, where we share offices with 30 other great third-sector organisations.

Christine Hancock, director

Message from the chairman

I was privileged to become the first chair of the C3 Board when it was founded in 2009 and, as I come to the end of my time in post, I take great pleasure in reflecting on the enormous strides made by the organisation over this time – strides that would have been impossible without the hard work of all our committed staff.

We have more than fulfilled our ambition to become a leading organisation bringing together health professionals, political decision-makers, business and the wider community – groups that must work together as partners to tackle non-communicable diseases. We have established several funded projects that are taking forward our ideas, and have a much more secure financial basis on which to build. Our International Breakfast Seminars, which introduce ideas from all over the world, are rightly events that draw appreciative audiences.

It has been a pleasure working with the Board, all of whom have contributed to the evolution of C3. Those of us who started together have now moved on, but with seven recently appointed members in place we leave the Board in robust good health. Sadly – for me personally, as well as for C3 – Naaz Coker, a close friend and one of our founding Board members, died in 2015. Her constructive criticism, her perceptive insights and, most of all, her joie de vivre will be sorely missed.

None of this would have been possible without the leadership of C3’s director, Christine Hancock. Both to me and to all in C3 she has given unstinting support and always helpful advice, and to her I give my particular thanks.

All in all, I have enjoyed the intellectual challenges, the good times and the fun all of us in C3 have had together and, although slim in physique, I am psychologically a more rounded person thanks to my time with C3.

Robin Stott
Our vision and how we work

The vision of C3 Collaborating for Health (C3) is for a world where there are no premature or preventable deaths from chronic non-communicable diseases (NCDs), and where people find it easier to live healthy lives.

An overlooked epidemic

Each year, almost two-thirds of deaths globally are from just four major NCDs – cardiovascular disease, cancers, type 2 diabetes and chronic lung disease. 16 million of those deaths are of the under-70s, many of working age with families to support. Despite this, NCDs are under-reported, under-acknowledged and under-funded.

Collaboration is the solution

C3 Collaborating for Health fosters multi-sector collaboration to catalyse action in the global community, to promote behaviour changes that address NCDs’ leading risk factors:

• improving diet (and avoiding harmful alcohol use);
• stopping smoking; and
• increasing physical activity.

Our areas of work

Bringing together ‘unusual suspects’ to encourage behaviour change (p. 10) for NCD prevention is at the core of C3’s work. Our projects focus on:

• health professionals, particularly nurses (p. 6);
• local communities (p. 7);
• businesses (p. 8); and
• workplace health (p. 9).

We provide space for partnership building through C3 events, such as our highly regarded International Breakfast Seminar series (p. 11) and Workplace Health Movement meetings (p. 9). In this report, events C3 organised or at which we presented are indicated by

C3’s writing (p. 12) is much in demand and includes preparing reports and précis of meetings, articles and recommendations. In this review, publications/reports available on the C3 website are indicated by

Digital media (p. 12) allows active interaction with C3’s global network of over 2,500 people (pp. 4 – 5), which we use to share news and best practice, to solicit advice and to provide project updates.

C3 embodies collaboration by supporting other organisations in their NCD prevention work. For example, in March 2016 we formally became an Advocate of World Obesity’s Action Initiative, supporting it through social media and regular meetings. In October, C3’s Katy Cooper was hosted by the New York Academy of Medicine as part of a short sabbatical, observing and lending insight to work on active aging in New York City.
C3’s global reach

C3 is always looking to expand its network into new countries and in countries where we do not yet have many network members.

We would love to hear from you – contact us at info@c3health.org and visit p. 16 for ways you can support our work.
72 countries

2,526 members total
Working with health professionals

Health professionals are among those best placed to give the trusted, accurate advice needed to prevent and treat NCDs. C3 works with health professionals (particularly nurses) to enhance their own knowledge and adopt healthy lifestyles, becoming advocates for their patients and in their families and communities.

Supporting healthier nurses

C3 was recognised through a Health Innovation Network Award for our involvement in a new project, First Impressions Count, raising awareness of personal health and wellbeing in the NHS workforce through a social-marketing campaign.* C3 worked with London South Bank University (LSBU) and Younger Lives on this initiative.

C3’s Healthier Nursing Students intervention funded by the Burdett Trust for Nursing was completed in December 2015. Findings indicated that nurses’ motivation to change their behaviour comes from a view that they should ‘practise what they preach’. This concept is being taken forward in a new project, the Healthy Weight Initiative for Nurses,* led by C3 in collaboration with LSBU and the Royal College of Nursing.

Including NCDs in health-provider guidelines

C3 has been supporting the Practical Approach to Care Kit (PACK), an initiative of the University of Cape Town. PACK includes a guideline, team-based training, health-systems strengthening, and monitoring and evaluation. It is now being rolled out through South Africa, Kenya, Nigeria and Mali and C3 ensured that evidence-based messaging about the NCD risk factors was included.

C3 was also a partner in ENS4Care, a EU-funded project promoting the use of e-health technology in prevention by nurses and social-care workers. C3 participated in the guidelines’ launch in December 2015 at the European Parliament, where they were well received.

Addressing NCDs in Mubende, Uganda

C3, with the Uganda NCD Alliance and the Uganda Diaspora Health Foundation, launched two small projects in 2015 in Mubende, Uganda, funded by Burdett. In November, the Community dialogue and engagement for NCD prevention project took place. District volunteer teams (nurses, village health teams, local councillors, community workers and Uganda NCD Alliance health experts) delivered key messages on tackling NCD risk factors – messages shared by local radio stations. 60 per cent of the 573 participants said they planned to change their lifestyles as a result of the programme.

The Healthy mothers: healthy babies project helped create a positive relationship between midwives and expectant mothers and made a positive link between mothers and health facilities.

Supporting healthier lives

C3 is delighted to have received an award from the Health Foundation to undertake a scoping exercise to capture existing evidence to support healthier lives in the UK. We have completed a series of briefings in C3’s areas of expertise, including workplace health (p. 9) and health in local communities (p. 7). Work on this project is ongoing.

Going ‘behind the headlines’

C3 and the Royal Society of Medicine co-organised a ‘behind the headlines’ meeting,* exploring how the scientific community and the media can work together to improve the accuracy of health messages, which are increasingly distorted. The event attracted 80 people and the feedback we received from delegates was very positive: ‘A wonderful mix of speakers tackling the topic from various angles.’
C3 continued to extend its partnerships across London and the UK to generate prevention efforts within local communities, particularly using the community audit tool CHESS®.

**Community Health Engagement Survey Solutions (CHESS®)**

C3 believes that engaging community members is the best way to break down the barriers to living a healthy life, and to generate sustainable change. To allow community members to map and improve their own community's health environment, C3 uses the CHESS® tool created by MATRIX Public Health Solutions, a US-based social enterprise.

**CHESS® mobile app**

CHESS® is a mobile app that poses specific questions about communities, allowing them to audit healthy food options and physical activity opportunities. Follow-up insight sessions with community members result in co-created recommendations for community change.

C3 and UK sports consultancy, Press Red, continued our strong partnership with several projects involving the CHESS® tool.

**Westminster, central London**

The public-health team in the City of Westminster sought insights from the community about their physical activity needs and barriers. Residents, ranging from teenagers to over-55s, completed CHESS® surveys in summer 2015.

The final report was shared with the council, providing community-driven recommendations for rolling out a 'healthy-lifestyles' project across the borough.

**Hounslow, west London**

In November 2015, C3 and Press Red were commissioned to investigate why people in Hounslow no longer use a large local park to the extent that it had been used in the past. Using the CHESS® surveys with the young and old from different communities, we created recommendations for the local council to use to take appropriate action.

Hounslow residents walking to the park on the audit

**Funding update**

In our last Annual Review, we reported that C3 presented CHESS® findings in Wandsworth, west London, to the chief executive of the local authority in January 2015.

‘We are pleased that the borough has been awarded £150,000 from the Community Sport Activation Fund, thanks largely to the evidence base we were able to submit with the CHESS® research and other elements of the project’

(a member of the Wandsworth Council team)

**Tower Hamlets, east London**

C3’s Phil Veasey continued to sit on the steering group of Morgan Stanley’s ‘Healthy Cities’ programme, overseeing its work in Poplar (Tower Hamlets).

Phil also participated in a working group to establish a health alliance of partners and community members on the Isle of Dogs. The group made good progress towards a programme of community investigations to plan the interventions that local people would like to see.

**Health starts where we live, learn, work and play**

Sir Michael Marmot, leading expert in the social determinants of health
Partnering with business, the ‘unusual suspects’

Why work with business?

At C3, we have seen that by engaging businesses we can reach populations that public-health campaigns do not. Businesses play a vital role in the fight against NCDs as they shape people’s behaviours, buying practices and environments.

Unilever

C3’s director, Christine Hancock, participated in Unilever’s materiality consultation exercise. She encouraged the company to continue to see NCDs as a significant issue, especially in emerging markets, and is delighted to see NCD included as one of the issues Unilever considers most important to the business.

Novo Nordisk A/S

Novo Nordisk A/S ran a summit in Copenhagen in November 2015, bringing together around 200 experts from all over the world. It focused on the five cities currently involved in the Cities Changing Diabetes initiative – Copenhagen, Houston, Shanghai, Mexico City and Tianjin.

Bupa


C3 is also working with Bupa to prepare a work brief that includes a review of the evidence related to nurses’ health, the impact on patients and families as well as on quality and safety, and associated successful workplace health interventions. Work on this project is ongoing.*

Novo Nordisk A/S

Ahead of the summit, C3 was commissioned to identify inspiring solutions to diabetes in cities around the world. Working closely with members of our global network (pp. 4 – 5), we researched and published a suite of seven examples – Urban Health Promotion: Selected Case Studies on Diabetes – that was well received. C3’s assistant director, Katy Cooper, also took part in a discussion on Cities Changing Diabetes at The Guardian, which was extensively featured in the paper in January 2016.

In April 2015, C3 delivered a successful high-level obesity roundtable meeting in London for Novo Nordisk A/S. It brought together a group of ‘unusual suspects’ to discuss what we must do to reverse the rise in obesity and overweight, to achieve a vision of UK society that will truly promote healthy weight in 2050. Obesity academics joined physicians, government representatives and experts in media, strategy, physical activity, nutrition, social innovation and social policy. The roundtable and the write-up were well received.

Join the conversation

Over the course of the year, C3 has met with numerous other businesses to discuss ways in which health can be embedded – including Edelman, IBM, Kellogg’s, Mars, M&C Saatchi World Services, The Coca-Cola Company, Uscreates and Vitality. See ways you can join the conversation on p. 16.

*Please note that these took place after the end of our financial year (see p. 17).
Workplace health

Many adults spend a significant proportion of their lives in the workplace, making it a crucial place in which to encourage healthy behaviour. Improving workplace health has substantial benefits for both employees and employers in terms of absenteeism and productivity. C3 uses its networking strengths to engage with a range of organisations around workplace health.

C3 Workplace Health Movement

The C3 Workplace Health Movement is a networking and knowledge-sharing group for people involved in workplace health. The goal is collaboration across all areas of health at work, identifying ways to make it easier for organisations to develop and maintain healthy, resilient and productive workforces.

In October 2015, the Movement’s patron, Dame Carol Black, addressed members at a symposium hosted at City Hall in London. Dame Carol is expert advisor on health and work to Public Health England and the Department of Health. This event launched the Movement’s 2015–16 activities.

The WPH Movement has held two subsequent workshops at City Hall. Paul Litchfield (chief medical officer, BT Group) spoke about wellbeing in the workplace and his work with the What Works Centre for Wellbeing. Don Shenker (founder and director, Alcohol Health Network) offered practical strategies to develop alcohol-awareness initiatives, managerial development and alcohol support systems for workforces.*

C3 thanks Punter Southall for its sponsorship of the Movement and City Hall for hosting the workshops.

Workplace Health Movement

185 members
↑ Up from 36 people in March 2015 [nearly 415 per cent increase over 12 months]

3 workshops
Held at London City Hall
40–50 attendees per workshop

Workplace health students

Professor Sallie Scovill’s international breakfast seminar (p. 11) was followed by a workshop, facilitated by C3, for her students from the health promotion programme at the University of Wisconsin. Participants were leading practitioners in health prevention/promotion and workplace health.

Improving the health and wellbeing of the NHS workforce

C3 received an award from the Health Foundation to build a comprehensive understanding of the workplace health and wellbeing evidence base and best practice within the NHS. The project also focuses on bringing the corporate and public sectors together, one of C3’s fortes. An insights paper has been produced, which will be significantly bolstered in the future with case studies, and a workshop is planned for later in the year.

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*Please note that these took place after the end of our financial year (see p. 17).
Changing behaviour, improving health

Changing behaviour requires an understanding of people’s actions to create meaningful interventions. This thread runs throughout C3’s work – whether among health professionals, people at work or in local communities.

For example, C3’s Phil Veasey used our work in inner-city London (p. 7) when he spoke at EPODE’s European Obesity Forum panel, to illustrate the importance of community engagement in helping to trigger behaviour change in local communities.

Credits4Health

Credits4Health is a EU-funded research initiative to change individual behaviour through an e-platform providing personalised support to help people increase their physical activity levels and eat more healthily. Users can redeem points accrued on the platform for credit with local businesses. See the project at www.credits4health.eu. C3 continued to lead the collaborative platform design process, including holding an expert review workshop on the e-platform in June 2015. Using this feedback, we ran technical development workshops with the consortium’s web team in Rome. C3 also contributed by making the tone of the e-platform more appealing.

The randomised controlled trials began in Italy, Spain and Greece in November/December 2015. C3 is tasked with disseminating the project results once the RCTs are completed in summer 2016.

Connecting digital-health professionals

C3 is partnering with University College London’s Centre for Behaviour Change (CBC) to create the ‘CBC Digi-hub in association with Credits4Health’. This partnership links CBC’s training and capacity-development content with C3’s networking skills to create an outreach programme sponsored by Credits4Health.

The CBC Digi-hub is an online network of European professionals interested in digital health and behaviour change. Although similar networks exist in North America and within some individual European countries, to date there is no network to link professionals across Europe and across sectors. Collaborative opportunities are therefore being missed, with much siloing of digital health and behaviour-change efforts.

In a very enthusiastic response, nearly 300 members joined in early 2016 when the CBC Digi-hub was first introduced.* The network will share the latest digital-health research, opportunities for collaboration, and promote the digital-health field’s growth. It will also raise awareness about the Credits4Health project, and we hope the CBC Digi-hub will be a lasting legacy of the European Commission’s funding.

The CBC Digi-hub will launch in summer 2016 with the Twitter hashtag #CBChub and with a LinkedIn group managed by C3.

*Please note that this took place after the end of our financial year (see p. 17).
C3’s global network

NCDs are truly a global burden. Almost three-quarters of NCD deaths, 28 million, occur in low- and middle-income countries. C3 draws on the expertise of its international network of over 2,500 members in 72 countries (pp. 4 – 5) to influence change.

In addition to C3’s international presentations and projects mentioned elsewhere, C3 provides snapshots of NCD prevention nationally and globally.

International Breakfast Seminars

Begun in 2010, C3’s International Breakfast Seminars host expert speakers from the C3 global network. These provide an intimate space for the presenters and C3’s local network to share challenges and best-practice examples of NCD prevention from around the world. Conversations over (a healthy!) breakfast have sparked collaborative projects and have even inspired one person to join C3’s staff. We invite multi-sector representatives to ensure dynamic discussion and networking.

From April 2015 to March 2016, C3 hosted six speakers from the USA, Canada, Belgium and New Zealand. Topics included food systems, food crises and environmental health, worksite wellness, e-cigarettes and obesity. Invited speakers are internationally renowned public-health leaders – university professors, directors, and innovative researchers. We were pleased by a great turnout of 187 attendees in total.

#C3events

NCD Global Scorecard

Since 2013, C3 has worked with the Instituto de Nutrición de Centroamérica y Panamá (INCAP) and GRAND (Global Research Against NCD) South on developing the NCD Global Scorecard, a new method of measuring response to the global NCD epidemic. The successful September 2015 launch included a letter in The Lancet and dissemination of one-page and longer country reports on the Scorecard website. The Scorecard results were also presented to Central American health ministers – who found it useful, and would like the Scorecard repeated.

The Scorecard asked 429 representatives of government, academia, NGOs, and the private sector how their 23 countries are addressing NCDs in practice. 51 indicators were used, covering governance, risk-factor control, research and surveillance, and health-systems readiness. Future plans include project evaluation and a second pilot phase.

The NCD Alliance invited C3 to share the Scorecard at a WHO Stakeholder Forum, organised during the First Global Meeting of National NCD Programme Managers and Directors. Richard Smith presented on C3’s behalf to national and regional NCD directors, highlighting the Scorecard as an example of how civil society can track NCD progress.

www.ncdglobalscorecard.org

@ncdscore

2015–2016 International Breakfast Seminars

• 6 expert speakers
• 4 countries
• 187 attendees

Kelly Brownell
Duke University, USA

Sallie Scovill
University of Wisconsin, USA

Michael Hamm
Michigan State University, USA

David Sweanor
University of Ottawa, Canada

Jean-Michel Borys
EPODE, Belgium

Boyd Swinburn
University of Auckland, New Zealand

The Scorecard results were also presented to Central American health ministers – who found it useful, and would like the Scorecard repeated.

*Please note that these took place after the end of our financial year (see p. 17).
An urgent message

The NCD epidemic is escalating, and health systems are buckling under enormous financial and patient demands. Many of the 38 million annual deaths from NCDs could be prevented or delayed. Only through whole-of-society collaboration can this be overcome.

Digital networking

A global burden requires an international response.

C3 leverages digital media to engage its widespread network, post updates on its work and converse with leading voices in the NCD-prevention community.

C3 continues to engage a global audience through its @C3health Twitter account. In addition to Tweeting about C3’s work, we share posts on scholarly articles and news stories. As active event attendees, we are frequently top Tweeters of highlights and speaker quotes. If we cannot attend in person, we follow along and Retweet highlights from global NCD prevention events.

We have continued Tweeting relevant updates from our @C3nursing and @C3WPH accounts for nursing leaders and Workplace Health Movement members.

We also created our own hashtag (#C3events), which our followers can use to see updates from C3 events, particularly the International Breakfast Seminars (p. 11) and Workplace Health Movement meetings (p. 9).

The C3 website continues to be a source of information on NCDs globally, and is a regularly updated library of information about C3’s projects and publications. We also continued our NCD world events calendar, which remains one of our most viewed pages.

www.c3health.org

C3’s social media

@C3health
over 3,450 followers
(† 23 per cent over 12 months)
nearly 8,400 Tweets published
(† 26 per cent over 12 months)

@C3Nursing
621 followers

@C3WPH
65 followers (our newest account)

Linkedin

Christine Hancock’s LinkedIn
1,727 connections
http://uk.linkedin.com/in/christinehancockc3

C3 LinkedIn organisational page
637 followers
http://www.linkedin.com/company/c3-collaborating-for-health

Publications

Summaries of meetings, articles and reports (identified throughout this Annual Review by ☐) are essential in disseminating C3’s work and events. C3 also translates existing research into clear English in ways that can then be used to drive initiatives and action to prevent NCDs.

External organisations, including those representing health professionals (p. 6) and businesses (p. 8), often commission C3’s writing. These are posted on the C3 website, subject to agreement from the organisations.

C3’s director co-authored a blog for Health Affairs titled ‘Silent killers amidst the fast and the furious’.

In August, C3’s assistant director wrote a fantastic update on NCDs and the Sustainable Development Goals, welcomed as ‘the most concise and user-friendly guide to the NCD landscape’ that one C3 network member had seen.

Enduring impact: C3 was pleased to see that a 2016 obesity report published by the Economist Intelligence Unit* extensively referenced C3 and EASO’s 2014 publication Obesity: Perception and Policy – Multi-country Review and Survey of Policymakers.

Selected presentations

June – ‘The contribution of nurses in preventing NCDs’ at the International Council of Nurses conference in Seoul, South Korea (a gathering of 7,000 nurses from 119 countries).

October – ‘The contribution of nurses globally in NCD prevention’ at the University of Bologna, Italy.

November – On NCDs as a global-health issue at the annual conference of Polygeia, in Cambridge, a student-led/staffed organisation offering research and report-writing support. C3 commissioned a report on mental-health/NCDs/risk factor links.

December – ‘Overcoming the challenges and barriers to engage with communities and promote activity and healthier lives’ at Policy UK’s event at the Royal Society of Chemistry, London.

*Please note that this took place after the end of our financial year (see p. 17)
Who we are

Christine Hancock is the founder and director of C3 Collaborating for Health. She is a clinician and manager, was a CEO in the NHS, and then CEO of the Royal College of Nursing for 12 years before becoming president of the International Council of Nurses, where she was involved in policy making with the WHO and other UN bodies and visited 50 countries. She was a governor of De Montfort University and is a trustee of a charity for homeless people.

Ina Andersson (research and projects officer)

Sarah Clarke (communications officer)

Katy Cooper (assistant director)

Pat Goodwin (associate – evaluation)

Chris Holmes (associate – behaviour change)

Pat Hughes (associate – nursing, health and development)

Sukhpreet Kaur (Board administrator)

Hester Rice (senior project manager)

Beverley Walker (financial manager)

C3 thanks the following staff for their dedication and wishes them all the best in their next endeavours:

Sheree Bryant (former associate – communications)

Kirsten Ireland (former associate – business engagement)

Egle Paskevičiute (former events manager and researcher)

Phil Veasey (former associate – public health and community engagement)

C3 welcomes new staff starting in April 2016:

Jane Abraham (associate – workplace health)

Vas Hirani (associate – public health and community engagement)

Michaela Nuttall (associate – nursing)

Amanda Thieba (events and office assistant)

C3 also thanks the following people for their support: Beth Blowers (transcription); Fay Buglass (governance); Yvonne Eddy (editorial support); Jean Gray (writing); Stephen Howard (Scorecard website); Joose TV and Barry Flood (C3 website); Ian McDowell (community engagement); Fabienne Poulet (fundraising); Martin Prestage (editorial); David Price (DebateGraph); Richard Smith (IT); Garth Stewart (report design); Tall Horse Accounts Ltd; Allison Thorpe (writing); and Anne Walker (English health system). Thanks to the House of St Barnabas, Soho, which has generously hosted many of our events over the last few years.

A special thanks to the interns who worked at C3 during the year: Anne Bode (Notre Dame University); Kelsey McNeely (Boston University); and Ranya Mulchandani (University of Birmingham).

C3’s International Advisory Panel

C3’s International Advisory Panel is made up of distinguished experts in the prevention of NCDs from around the world.

- Sir George Alleyne director emeritus, Pan American Health Organization
- Dr Beatriz Champagne executive director, InterAmerican Heart Foundation
- Dr Rachel Nugent vice president, global NCDs, RTI International
- Dr Derek Yach chief health officer at The Vitality Group, where he leads The Vitality Institute

We look forward to continuing our work with the Panel in the coming year.

Want to join C3?

Read about how you can contribute to C3’s work on p. 16.
C3’s Board

C3 thanks Richard Smith, outgoing Board member, for his help and advice since C3’s inception.

Robin Stott, C3’s chair, works to promote social, environmental and economic justice as a basis for global good health. He was a consultant physician in Lewisham Hospital, where he ran a diabetes clinic, and has been active in the anti-nuclear movement and with the charity Medact. He co-chairs the Climate and Health Council, engaging health professionals in tackling climate change.

Zoe Bedford founded ZPB Ltd to extend private-, public- and third-sector organisations’ influence in the health sector. She specialises in complex stakeholder engagement and management, content and strategic communications. Zoe manages The Cambridge Health Network, is a fellow of the RSA, and a member of The Entrepreneurs’ Organisation (EOUK).

Christopher Exeter is a director at UnitedHealth Group. Previously, he was a senior fellow in the Faculty of Medicine at Imperial College London, and a senior civil servant. Christopher is currently completing a book on health and technology, and coediting a book on service design in health.

Pam Garside has her own management consultancy, Newhealth, advising UK/US health-sector players. She has a particular interest in strategy and innovation. She is a fellow of the Judge Business School at the University of Cambridge and co-chair of The Cambridge Health Network. Pam is also an adjunct professor at Imperial College Business School.

Sally Gilding’s professional career began at The Law Commission, and international law firm Clifford Chance, covering corporate finance and capital markets. She spent 18 years at Deutsche Bank, then established her own independent business, harnessing her expertise in corporate trust and corporate services. Board-level appointments include CEO of a Corporate Trust company.

Lise Kingo is executive director of the United Nations Global Compact. Prior to this, she was with Novo Nordisk where she had global responsibility for HR, business assurance, corporate communications and branding, public affairs and corporate sustainability – for 12 years she was executive vice president, chief of staff and member of executive management.

Caroline Stanger is director of Clinical Leadership at Bupa, a global health and care company that operates across 190 countries. She has a clinical background and brings considerable experience of working at both national (UK) and regional level to enhance and develop leadership capability across health systems.

Principal funders

*The Credits4Health project (p. 10) has received funding from the European Union’s Seventh Framework Programme for research, technological development and demonstration under grant agreement no. 602386.*
Future plans

What will C3 accomplish in 2016–17? Look for updates in our newsletters, social media and next year’s Annual Review.

| Working with health professionals | • Develop a Healthy Weight Initiative for Nurses (WIN.) project with LSBU and RCN  
• Implement the First Impressions Count campaign  
• Host an Expert Advisory Group meeting for the Health Foundation and complete the scoping exercise |
| Working with local communities | • Continue our new Healthy Communities project in the north of England and Scotland  
• Engage with our local community in south London |
| Business engagement | • Challenge and support some food companies who have plans to prioritise healthy options |
| Workplace health | • Host Workplace Health Movement meetings, and grow the network by 20 per cent  
• Create and widely share a workplace health infographic  
• Complete NHS workplace health briefing, case studies and workshop for The Health Foundation  
• Assist Wellbeing People with preparation of the Wellbeing Symposium in Canterbury – 22 February 2017 |
| Events | • Host at least six International Breakfast Seminars  
• Celebrate our 50th International Breakfast Seminar  
• Develop an evaluation tool for C3 events to inform improvements |
| Digital media | • Secure funding for website redevelopment  
• Build on our active and engaging social-media presence by increasing Tweets by 25 per cent |
| Publications | • In collaboration with student-led global health think-tank Polygeia, complete a report on the relationship between mental health, the major NCDs and risk factors  
• Continue the NCD and development updates |
| Behaviour change | • Complete the Credits4Health project, including translating and disseminating the research findings for an international audience  
• With University College London’s Centre for Behaviour Change, manage the recruitment and content of the ‘CBC Digi-hub in association with Credits4Health’ |
| Other | • Identify potential funding opportunities for another round of Scorecard and develop an evaluation protocol |
How you can support C3’s work

Donate through our website
Your generous contributions support our work, including allowing our reports, publications (p. 12) and events to be freely available.

Give online at www.c3health.org or in person at one of our events.

Support C3 events
Attend our events, such as Workplace Health Movement meetings (p. 9) or International Breakfast Seminars (p. 11).
Network with other professionals and internationally renowned speakers.
Tweet highlights and follow along at #C3events.

Sponsor International Breakfast Seminars
This highly regarded series is uniquely C3, providing a key networking space for cross-sector professionals and a venue for partnership formation (p. 11).
Your sponsorship would offset costs – including of the healthy breakfast provided – and allow for wider dissemination of the speakers’ presentations.
Contact ina.andersson@c3health.org to learn more.

Join our network
Engage with us on Twitter (@C3health) and LinkedIn (p. 12).
Sign up for our email list by emailing communications@c3health.org.
Share our news, event highlights and publications with your personal network – through email and on social media.

Pop by our office
We love to host visitors at our office, a three-minute walk from Borough Tube station in London. Meet with us to tell us more about what you do and to exchange ideas for ways we can work together.

Collaborate with us
Partner with us on a project or commission us to undertake work for you. Visit our website to learn more about our past projects and collaborations.

Become a C3-er
Intern with us, volunteer your subject-matter expertise or apply to be a trustee.
C3 Collaborating for Health  
Financial information for the period to 31 December 2015

<table>
<thead>
<tr>
<th>INCOME &amp; EXPENDITURE</th>
<th>Unrestricted funds £</th>
<th>Restricted funds £</th>
<th>2015 total funds £</th>
<th>2014 total funds £</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incoming resources</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For charitable activities</td>
<td>453,519</td>
<td>124,932</td>
<td>578,451</td>
<td>775,781</td>
</tr>
<tr>
<td>Investment income</td>
<td>17</td>
<td>–</td>
<td>17</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total incoming resources</strong></td>
<td>453,536</td>
<td>124,932</td>
<td>578,468</td>
<td>775,781</td>
</tr>
<tr>
<td><strong>Resources expended</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>From charitable activities</td>
<td>483,834</td>
<td>123,383</td>
<td>607,217</td>
<td>794,312</td>
</tr>
<tr>
<td><strong>Total resources expended</strong></td>
<td>483,834</td>
<td>123,383</td>
<td>607,217</td>
<td>794,312</td>
</tr>
<tr>
<td><strong>Net movement in funds</strong></td>
<td>(30,298)</td>
<td>1,549</td>
<td>(28,749)</td>
<td>(18,531)</td>
</tr>
<tr>
<td>Gross transfers between funds</td>
<td>14,750</td>
<td>(14,750)</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Net expenditure for the year / Net movement in funds</strong></td>
<td>(15,548)</td>
<td>(14,750)</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Fund balances brought forward at 1 Jan 2015</td>
<td>(15,116)</td>
<td>39,569</td>
<td>24,453</td>
<td>42,984</td>
</tr>
<tr>
<td><strong>Total funds at 31 December</strong></td>
<td>(30,664)</td>
<td>39,569</td>
<td>(4,296)</td>
<td>24,453</td>
</tr>
</tbody>
</table>

C3's main charitable activities were supported by the following organisations:  
Burdett Trust for Nursing, the Health Foundation, the Sowerby Foundation, Novo Nordisk, Royal College of Nursing, European Commission, Optum, Punter Southall Health & Protection, BUPA and Press Red.

<table>
<thead>
<tr>
<th>SUMMARY BALANCE SHEET AT 31 DECEMBER 2015</th>
<th>2015 £</th>
<th>2014 £</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>24,316</td>
<td>214,749</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>138,508</td>
<td>28,390</td>
</tr>
<tr>
<td>Creditors: amounts falling due within one year</td>
<td>(167,120)</td>
<td>(218,686)</td>
</tr>
<tr>
<td>Net current assets</td>
<td>(4,296)</td>
<td>24,453</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td>(4,296)</td>
<td>24,453</td>
</tr>
<tr>
<td>Funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restricted funds</td>
<td>26,368</td>
<td>39,569</td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td>(30,664)</td>
<td>(15,116)</td>
</tr>
<tr>
<td><strong>Total funds</strong></td>
<td>(4,296)</td>
<td>24,453</td>
</tr>
</tbody>
</table>

**Trustees’ Statement**

The information provided in these financial statements is a summary of the draft audited statutory accounts, which at the time of printing had not been signed off and filed. These summarised figures may not contain sufficient information to allow for a full understanding of the financial affairs of the charity. For further information, the full annual accounts should be viewed on the Charity Commission web site and can be obtained from the charity’s offices at 7–14 Great Dover Street, London SE1 4YR.