

|       | <b>\</b> | Action Alliance |
|-------|----------|-----------------|
| Name: |          |                 |

## 

| rganisation:  |  |  |  |
|---|--|--|--|
| I PLEDGE TO (Tick relevant boxes)   |  |  |  |
| Sign up to the DAA campaign   |  |  |  |
| ☐ Sign Department of Health's Joint Declaration on post diagnostic support                |  |  |  |
| Show my commitment to improving outcomes<br>for seldom heard groups                       |  |  |  |
| Play a role in improving post diagnostic support<br>for seldom heard groups               |  |  |  |
| Conduct an annual survey to monitor how many<br>seldom heard groups I support             |  |  |  |
| Identify & promote best practice to ensure a better<br>experience for seldom heard groups |  |  |  |
| Make sure action plans include a section on seldom<br>heard groups                        |  |  |  |



What will you do differently as a result of signing up to this campaign?

Which seldom heard groups are you aiming to help?

What will you/ your organisation do to support people from these groups?



How many people do you hope to support?

What will success look like?

How will you make it sustainable?



| Will you commit to sharing case studies at the end                   |
|--|
| of the campaign?   |
| ☐ Yes  |
|  |
| □ No   |
| If yes, please share the methodology involved and how you delivered. |
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