

Joint Health and Wellbeing Strategy 2022-2025: Outcomes Summary Report

Rutland

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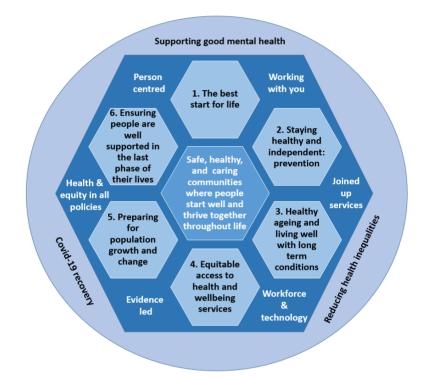
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Purpose of Report

In line with the Rutland Joint Health and Wellbeing Strategy (2022-2025), this report has been produced to support and monitor the performance of indicators that are linked to each priority area within the strategy. A dashboard of indicators has also been developed to aid discussion and monitor progress.

The Rutland Joint Health and Wellbeing Strategy has six priority areas for action, with three cross cutting themes. The diagram below summarises the priorities and principles:



The outcomes summary report and dashboards will be updated on a quarterly basis to support the delivery of the Rutland Joint Health and Wellbeing Strategy. It is important to note that the dashboard will continue to be developed as the strategy evolves and the delivery plan is developed.

The dashboard sets out, in relation to each indicator, the statistical significance compared to the overall England position or relevant service benchmark where appropriate. A RAG rating of 'green' shows those that are performing better than the England value or benchmark and 'red' indicates worse than the England value or benchmark.

Appendix 1 provides more details on the similar areas to Rutland.

Priority 1: Enabling the best start in life

Performance Summary

- Out of all the comparable indicators presented for the enabling the best start in life priority, seven are green, 13 are amber and four are red. Two indicators have no comparison, and two indicators are lower than national.
- Rutland performed significantly worse than England/benchmark for the following four indicators:

Proportion of children receiving a 12-month review - Rutland is ranked 16th out of 16 in 2021/22. The proportion of children receiving a 12-month review has decreased from 37.0% in 2020/21 to 29.7% in 2021/22.

Children in care immunisations - Rutland is ranked 16th out of 16 in 2021. The proportion of children in care for at least 12 months whose immunisations were up to date increased from 56.0% in 2020 to 62.0% in 2021. Rutland has performed significantly worse than England since 2019.

Population vaccination coverage for HPV (one dose) for 12-13 years old (Females) - Rutland is ranked 16th out of 16 in 2020/21. The latest value for Rutland is 61.2%, which is below the benchmarking goal of 80%.

Population vaccination coverage for HPV (one dose) for 12-13 years old (Males) - Rutland is ranked 16th out of 16 in 2020/21. The latest value for Rutland is 62.5%, which is below the benchmarking goal of 80%.

- Of the seven green indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicator:
 Hospital admissions caused by unintentional and deliberate injuries in children (0-14 years).
- There are currently five indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - o Proportion of children receiving a 12-month review
 - Children in care immunisations
 - HPV Vaccination coverage for one dose (12-13 year) (Females)
 - HPV Vaccination coverage for one dose (12-13 year) (Males)
 - Percentage of 5 year olds with experience of visually obvious dental decay

Rutland Joint Health and Wellbeing Strategy - Priority 1: The best start for life

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

ndicator				Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
C04 - Low birth weight of term babies	Р	>=37 weeks g	2021	2.4	10/16	1.6	2.8	2.8		
C09a - Reception: Prevalence of overweight (including obes	ity) P	4-5 yrs	2021/22	20.3	5/16	17.3	25.5	22.3		
ew referrals to secondary mental health services, per 100,0		<18 yrs	2019/20	4,602.8	4/16	2,966.6	10,475.9	6,977.4	_	
A&E attendances (0-4 years)	Р	0-4 yrs	2019/20	397.6	4/16	316.1	679.0	659.8		
missions for lower respiratory tract infections in infants ag		<1 yr	2020/21	Null	Null	Null	Null	94.9		
Neonatal mortality and stillbirth rate	Р	<28 days	2020	7.4	13/16	3.3	8.8	6.5		
Proportion of children receiving a 12-month review	Р	1 yr	2021/22	29.7	16/16	97.4	29.7	81.9		
C05a - Baby's first feed breastmilk		Newborn	2018/19	77.6	3/16	79.6	63.0	67.4	-	
Children in care immunisations		<18 yrs	2021	62.0	16/16	100.0	62.0	86.0	_	
General fertility rate		15-44 yrs	2021	45.4	1/16	45.4	63.2	54.3	_	
Proportion of infants receiving a 6 to 8 week review		6-8 weeks	2021/22	83.7	12/16	97.6	7.6	81.5		
Estimated number of children and young people with mental d		5-17 yrs	2017/18	752.2	1/14	752.2	9,588.2	Null		
Average Attainment 8 score		15-16 yrs	2020/21	54.3	2/16	56.7	48.4	50.9	_	
CO6 - Smoking status at time of delivery		All ages	2021/22	6.8	3/16	5.6	12.4	9.1		
CO7 - Proportion of New Birth Visits (NBVs) completed with	i n P	<14 days	2021/22	88.8	6/16	94.8	32.7	82.6		
C08a - Child development: percentage of children achieving	а Р	2-2.5 yrs	2021/22	81.3	11/16	90.1	43.5	81.2		
C09b - Year 6: Prevalence of overweight (including obesity	/) P	10-11 yrs	2021/22	30.2	2/16	28.4	39.1	37.8		
Children in care	Р	<18 yrs	2021	43.0	5/16	37.0	111.0	67.0		
D04e - Population vaccination coverage: HPV vaccination	F	12-13 yrs	2020/21	61.2	16/16	98.3	61.2	76.7		
coverage for one dose (12 to 13 year old)	Μ	12-13 yrs	2020/21	62.5	16/16	93.8	62.5	71.0		
E02 - Percentage of 5 year olds with experience of visually o	bv P	5 yrs	2018/19	25.3	10/11	13.1	31.9	23.4	-	
302a - School readiness: percentage of children achieving a	•	5 yrs	2021/22	70.9	3/16	71.8	63.8	65.2	-	
C11a - Hospital admissions caused by unintentional and del	ib P	0-4 yrs	2020/21	84.5	1/16	84.5	145.3	108.7		
C11a - Hospital admissions caused by unintentional and del	ib P	<15 yrs	2020/21	49.6	1/16	49.6	97.5	75.7		
E01 - Infant mortality rate	Р	<1 yr	2018 - 20	3.4	11/16	2.4	6.4	3.9	-	
Hospital admissions as a result of self-harm (10-24 years)		10-24 yrs	2020/21	309.9	2/16	304.2	794.5	421.9		
Hospital admissions for mental health conditions		<18 yrs	2020/21	127.4	12/16	72.9	251.0	87.5	-	
School pupils with social, emotional and mental health needs: $\hfill P$		School age	2021	2.4	7/16	1.9	3.5	2.8		
Itatistical Significance Better Similar ompared to England or Worse Not compared Benchmark: Higher Lower			on of Travel:		ing and get	tting better 🔺 In	ncreasing ncreasing and gettin ncreasing and gettin	ng better 🚃	No significant ch Cannot be calcul	

Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Priority 2: Staying healthy and independent: prevention

Performance Summary

- Out of all the comparable indicators presented for the staying healthy and independent: prevention priority, five are green, three are amber and two are red.
- Rutland performed significantly worse than England/benchmark for the following indicators:

Cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check – Rutland is ranked 14th out of 16 in 2017/18-2021/22. The latest value for Rutland is 38.6%, which is significantly worse than the national average of 44.8%.

Population vaccination coverage (shingles) for 71 years – Rutland is ranked 16th out of 16 in 2019/20. The latest value for Rutland is 31.4%, which is significantly worse than the benchmark of 50%.

- Of the four green indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicators:
 Percentage of physically active adults.
 Cancer screening coverage-cervical cancer (aged 50 to 64 years)
- There are currently four indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - Loneliness: Percentage of adults who feel lonely often/always or some of the time
 - Cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check
 - o Self-reported wellbeing: people with a high anxiety score
 - Population vaccination coverage Shingles vaccination coverage (71 years)

Rutland Joint Health and Wellbeing Strategy - Priority 2: Staying healthy and independent: prevention

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
	of adults who feel lonely often or me of the time	P	16+ yrs	2019/20	24.8	14/16	13.9	26.7	22.3		
	ed 18+) classified as overweight obese	Ρ	18+ yrs	2020/21	59.5	2/16	59.0	68.3	63.5		
40-74 offered an NHS Healt	e of the eligible population aged ch Check who received an NHS ch Check	Ρ	40-74 yrs	2017/18 - 21/22	38.6	14/16	82.0	34.8	44.8		
	ng: people with a high anxiety core	Ρ	16+ yrs	2021/22	29.2	16/16	16.8	29.2	22.6	_	
C17a - Percentage of	physically active adults	Ρ	19+ yrs	2020/21	74.0	1/16	74.0	64.4	65.9		
C24a - Cancer screening	g coverage: breast cancer	F	53-70 yrs	2022	71.4	8/16	78.9	54.1	64.9		
	rage: cervical cancer (aged 25 to ars old)	F	25-49 yrs	2022	74.4	9/16	77.0	67.6	67.6		
	rage: cervical cancer (aged 50 to ars old)	F	50-64 yrs	2022	79.5	1/16	79.5	73.2	74.6		
C24d - Cancer screenin	g coverage: bowel cancer	Ρ	60-74 yrs	2022	77.5	2/16	77.6	71.0	70.3		
	coverage: Shingles vaccination (71 years)	Ρ	71	2019/20	31.4	16/16	56.8	31.4	48.2		
Statistical Significance compared to England or Benchmark:	Better Simila Worse Not c Higher Lowe	ompared	Directio	n of Travel:		ng and gett	ting better 🔺 In	creasing creasing and gettin creasing and gettin	ng better 😑	 No significant chan Cannot be calculate 	

Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Priority 3: Healthy ageing and living well with long term conditions

Performance Summary

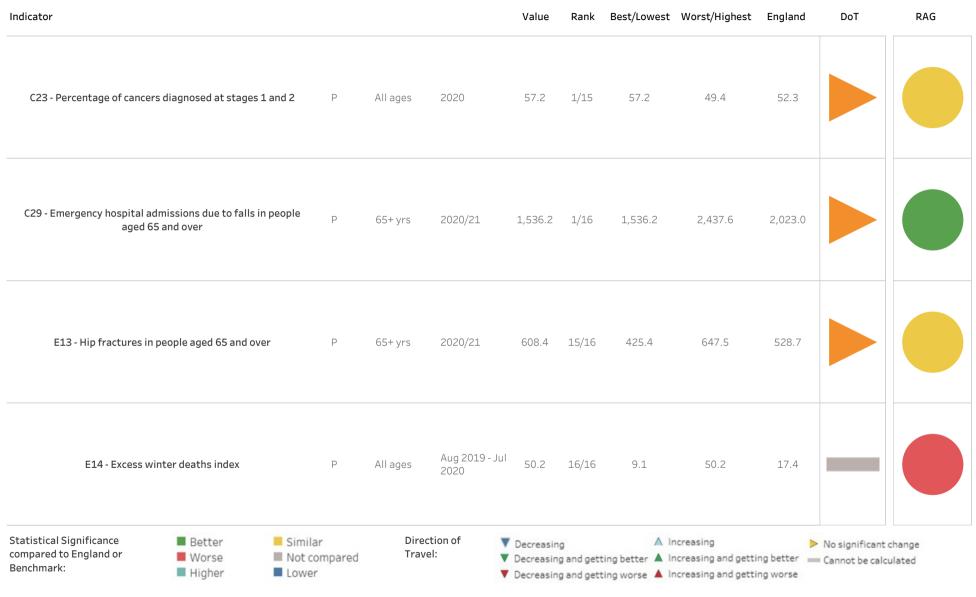
- Out of all the comparable indicators presented for the healthy ageing and living well with long term conditions priority, one is green, two are amber and one is red.
- Rutland performed significantly worse than England/benchmark for the following indicator:

Excess winter deaths index – Rutland is ranked 16th out of 16 in Aug 2019- Jul 20. The latest value for Rutland is 50.2%, which is significantly worse than the national average of 17.4%. Previously, the percentage of excess winter deaths in Rutland had remained statistically similar to the national average since 2001/02.

- There are currently two indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - Hip fractures in people aged 65 and over
 - Excess winter deaths index

Rutland Joint Health and Wellbeing Strategy - Priority 3: Healthy ageing and living well with long term conditions

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

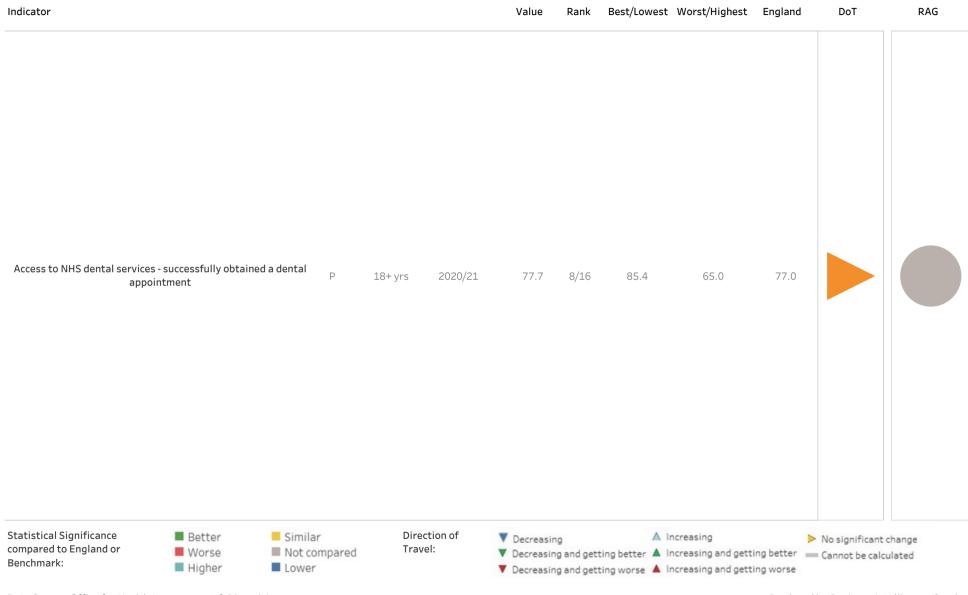


Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Priority 4: Ensuring equitable access to services for all Rutland residents

Performance Summary

- The one indicator presented below for the ensuring equitable access to services for all Rutland residents priority is the Access to NHS dental services successfully obtained a dental appointment indicator.
- The percentage of people who successfully obtained an NHS dental appointment in the last two years has decreased from 94.6% in 2019/20 (where Rutland performed in the 2nd best quintile nationally) to 77.7% in 2020/21, where Rutland now performs in the middle quintile. Rutland is ranked 8th out of 16 when compared to its nearest neighbours.



Rutland Joint Health and Wellbeing Strategy - Priority 4: Equitable access to health and wellbeing services

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Priority 5: Preparing for our growing and changing population

Performance Summary

• Out of all the comparable indicators presented for the preparing for our growing and changing population priority, one is green and four are amber. Three indicators were not suitable for comparison.

Rutland Joint Health and Wellbeing Strategy - Priority 5: Preparing for population growth and change

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
Air pollution: fine parti	culate matter (historic indicator)	N/A	Not applicable	2020	6.2	8/15	4.8	7.3	6.9		
Average	e weekly earnings	Ρ	16+ yrs	2021	551.3	4/16	575.3	402.7	496.0		
physical or mental long te	oyment rate between those with a erm health condition (aged 16 to 64) erall employment rate	Ρ	16-64 yrs	2021/22	6.8	5/16	-0.5	14.4	9.9		
B12b - Violent crime - violence offences per 1,000 population		Ρ	All ages	2021/22	17.3	1/16	17.3	38.9	34.9		
	nouseholds owed a duty under the sness Reduction Act	N/A	Not applicable	2021/22	6.1	2/15	4.6	14.9	11.7		
	w income, low energy efficiency ethodology)	N/A	Not applicable	2020	11.9	9/16	6.7	16.7	13.2		
	rcentage of adult carers who have as ontact as they would like	Ρ	18+ yrs	2021/22	27.0	6/16	38.4	16.0	28.0		
Percentage of adults cycli	ing for travel at least three days per week	Ρ	16+yrs	2019/20	1.1	11/16	4.4	0.6	2.3		
Statistical Significance compared to England or Benchmark:BetterSimilarDirection of Travel:Worse HigherNot comparedLower					 ▼ Decreasing ▲ Increasing > No significant ch ▼ Decreasing and getting better ▲ Increasing and getting better ■ Cannot be calcul ▼ Decreasing and getting worse ▲ Increasing and getting worse 						

Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Priority 6: Ensuring people are well supported in the last phase of their lives

Performance Summary

- Out of the four comparable indicators presented for the ensuring people are well supported in the last phase of their lives priority, one is amber, two are higher and one is lower.
- Rutland performed significantly higher than England/benchmark for the following indicators:

Percentage of deaths that occur at home – Rutland is ranked 16th out of 16 in 2021. The proportion of deaths that occur at home (all ages) has decreased from 33.9% in 2020 to 33.6% in 2021, which is significantly higher than the national average of 28.7%.

Percentage of deaths that occur in care homes – Rutland is ranked 15th out of 16 in 2021. The proportion of deaths that occur in care homes (all ages) has increased from 27.5% in 2020 (where it performed statistically similar to England) to 28.0% in 2021, which is significantly higher than the national average of 20.2%.

• Rutland performed significantly lower than England/benchmark for the following indicator:

Percentage of deaths that occur in hospital – Rutland is ranked 1st out of 16 in 2021. The proportion of deaths that occur at hospital (all ages) has increased from 33.9% in 2020 to 35.5% in 2021. Rutland has performed significantly lower than England for this indicator since 2019.

Indicator Value Rank Best/Lowest Worst/Highest England DoT RAG Percentage of deaths that occur at home 2021 33.6 16/16 25.0 33.6 Ρ All ages 28.7 Percentage of deaths that occur in care homes Ρ All ages 2021 28.0 15/16 15.1 30.3 20.2 Percentage of deaths that occur in hospital Ρ All ages 2021 35.5 1/16 35.5 48.5 44.0 39.8 Temporary Resident Care Home Deaths, Persons, All Ages (%) Ρ All ages 2021 9/16 29.6 50.8 39.6 Statistical Significance Similar Direction of Better V Decreasing ▲ Increasing > No significant change compared to England or Travel: Worse Not compared ▼ Decreasing and getting better ▲ Increasing and getting better ── Cannot be calculated Benchmark: ▼ Decreasing and getting worse ▲ Increasing and getting worse Higher Lower

Rutland Joint Health and Wellbeing Strategy - Priority 6: Ensuring people are well supported in the last phase of their lives

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Cross Cutting Themes:

Supporting Mental Health

Performance Summary

- Out of all the comparable indicators presented for supporting mental health, four are green, six are amber and four are not comparable.
- Of the four green indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicators: Percentage of physically active adults Emergency Hospital Admissions for Intentional Self-Harm (Persons) Emergency Hospital Admissions for Intentional Self-Harm (Females) Admission episodes for alcohol-related conditions (Broad): New method

Rutland Joint Health and Wellbeing Strategy - Mental Health Indicators

Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
	inxiety among social care users: % o cial care users	f P	18+ yrs	2018/19	44.5	2/15	43.9	58.8	50.5	—	
B11 - Domestic abus	se related incidents and crimes	Ρ	16+ yrs	2021/22	24.1	4/16	23.0	40.6	30.8	-	
•	ercentage of adult social care users ocial contact as they would like	Ρ	18+ yrs	2021/22	39.5	10/16	47.2	34.8	40.6		
	,		65+ yrs	2021/22	31.8	3/16	27.3	46.4	37.3		
	rcentage of adult carers who have a ontact as they would like	s P	18+ yrs	2021/22	27.0	6/16	38.4	16.0	28.0		
			65+ yrs	2021/22	26.3	8/16	16.7	35.3	28.8	_	
C14b - Emergency Hospital Admissions for Intentional Self-Harm		Ρ	All ages	2020/21	127.4	1/16	127.4	333.7	181.2		
		F	All ages	2020/21	141.7	1/16	141.7	490.3	238.3		
		Μ	All ages	2020/21	110.1	9/16	85.5	178.4	126.4		
C17a - Percentage of physically active adults		Ρ	19+ yrs	2020/21	74.0	1/16	74.0	64.4	65.9		
C28d - Self reported we	llbeing: people with a high anxiety score	Ρ	16+ yrs	2021/22	29.2	16/16	16.8	29.2	22.6		
Depression: C	QOF prevalence (18+ yrs)	Ρ	18+ yrs	2021/22	11.2	1/16	11.2	14.9	12.7		
Mental Health: QOF prevalence (all ages)		Ρ	All ages	2021/22	0.7	4/16	0.6	1.2	1.0		
	alcohol-related conditions (Broad): or uses a new set of attributable fra	. Р	All ages	2020/21	1,018.8	1/16	1,018.8	1,659.5	1,499.8		
tatistical Significance ompared to England or enchmark:	Better Sin Worse No Higher Lo	t compa	Trave	tion of I:		ng and ge	etting better 🏼	Increasing Increasing and Increasing and		r — Cannot	ificant chan be calculate

Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

Reducing Health Inequalities

Performance Summary

- Out of all the comparable indicators presented for reducing health inequalities, three are green and one is amber.
- Of the three green indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicators:
 Healthy life expectancy at birth (Males)
 Life expectancy at birth (Males).

Rutland Joint Health and Wellbeing Strategy - Cross Cutting Theme: Reducing health inequalities

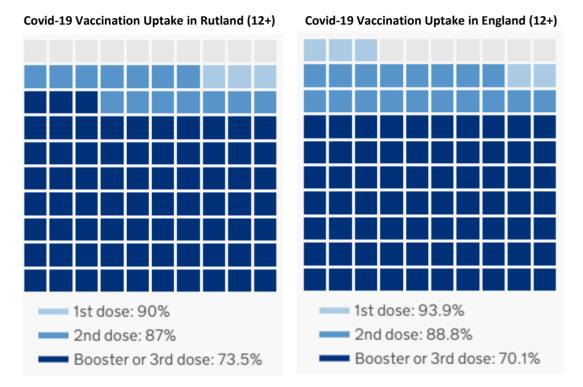
Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	l DoT	RAG
A01a - Healthy li	fe expectancy at birth	F	All ages	2018 - 20	66.8	9/16	68.2	62.0	63.9		
		Μ	All ages	2018 - 20	74.7	1/16	74.7	61.9	63.1		
A01b - Life e	xpectancy at birth	F	All ages	2018 - 20	85.0	3/16	85.4	83.2	83.1		
		Μ	All ages	2018 - 20	83.2	1/16	83.2	79.0	79.4		
Note: For A01b - Life expectar Statistical Significance compared to England or Benchmark:	Better Worse	orst/Highest value Similar Not compared Lower		ion of		g and get	ting better 🔺 Ir	ncreasing increasing and gettin increasing and gettin		No significant Cannot be calc	
Data Source: Office for Health https://fingertips.phe.org.uk/									Produc		telligence Service dated March 2023

Covid Recovery

• COVID-19 vaccinations (% Uptake)

The Covid-19 vaccination uptake in Rutland is higher than England for booster/dose 3 for those aged 12 and over, as of 2nd March 2023. The percentage uptake for dose 1 and dose 2 in Rutland is lower in comparison to the national average for those aged 12 and over.



Source: Coronavirus (COVID-19) in the UK dashboard (https://coronavirus.data.gov.uk/)

• COVID-19 Deaths**

As of week 7 in 2023, there have been a total of 110 Covid-19 deaths in Rutland. Of the total deaths involving Covid-19 in Rutland, 57 (51.8%) were in a hospital setting and 43 (39.1%) were in a care home setting.

Since the beginning of the pandemic (week 12, 2020) there have been a total of 1,262 deaths (all causes) in Rutland.

Based on the average mortality data for 2015-19, we would expect 1,119 deaths in Rutland for this period. This reveals an excess of 143 deaths from any cause in Rutland during this period.

Appendix 1

Similar areas to Rutland

The Chartered Institute of Public Finance and Accountancy (CIPFA) Nearest Neighbours model seeks to measure similarity between Local Authorities. The nearest neighbours to Rutland are listed below.

Nearest CIPFA neighbours to Rutland available from fingertips include:

- Bedford
- Buckinghamshire UA
- Central Bedfordshire
- Cheshire East
- Cheshire West and Chester
- Cornwall
- Dorset
- East Riding of Yorkshire
- Herefordshire
- North Somerset
- Shropshire
- Solihull
- South Gloucestershire
- West Berkshire
- Wiltshire



If you require information contained in this leaflet in another version e.g. large print, Braille, tape or alternative language please telephone: 0116 305 6803, Fax: 0116 305 7271 or Minicom: 0116 305 6160.

જો આપ આ માહિતી આપની ભાષામાં સમજવામાં થોડી મદદ ઇચ્છતાં હો તો 0116 305 6803 નંબર પર ફોન કરશો અને અમે આપને મદદ કરવા વ્યવસ્થા કરીશું.

ਜੇਕਰ ਤੁਹਾਨੂੰ ਇਸ ਜਾਣਕਾਰੀ ਨੂੰ ਸਮਝਣ ਵਿਚ ਕੁਝ ਮਦਦ ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ 0116 305 6803 ਨੰਬਰ ਤੇ ਫ਼ੋਨ ਕਰੋ ਅਤੇ ਅਸੀਂ ਤੁਹਾਡੀ ਮਦਦ ਲਈ ਕਿਸੇ ਦਾ ਪ੍ਰਬੰਧ ਕਰ ਦਵਾਂਗੇ।

এই তথ্য নিজের ভাষায় বুঝার জন্য আপনার র্যাদ কোন সাহায্যের প্রয়োজন হয়, তবে 0116 305 6803 এই নম্বরে ফোন করলে আমরা উপযুক্ত ব্যক্তির ব্যবস্থা করবো।

اگر آپ کو بید معلومات بیجنے میں کچھ مد د در کا رہے تو براہ مہر بانی اس نمبر پر کال کریں 6803 6805 0116 اور ہم آپ کی مد د کے لئے سمی کا انظام کر دیں گے۔

假如閣下需要幫助,用你的語言去明白這些資訊, 請致電 0116 305 6803,我們會安排有關人員為你 提供幫助。

Jeżeli potrzebujesz pomocy w zrozumieniu tej informacji w Twoim języku, zadzwoń pod numer 0116 305 6803, a my Ci dopomożemy.

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