

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

Rutland

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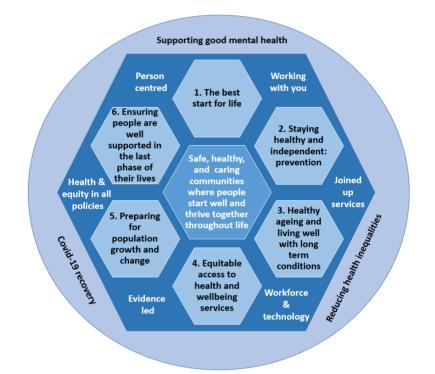
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Purpose of Report

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 indicators 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

- Out of all the comparable indicators presented for the enabling the best start in life priority, nine are green, 11 are amber and one is red. Five indicators have no comparison, and two indicators are lower than national.
- Rutland performed significantly worse than England/benchmark for the following indicator:
 - 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.
- Of all the indicators, Rutland ranks 1st (best/lowest performing) when compared to its similar neighbours for the following indicators:
 - o Average attainment 8 score
 - o Children in care
 - Hospital admissions caused by unintentional and deliberate injuries in children (0-14 years)
 - Estimated number of children and young people with mental disorders aged 5 to 17
 - o General fertility rate
- There is currently one indicator where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - o Proportion of children receiving a 12-month review

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).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
A&E attendances (0 to 4 years)		Ρ	0-4 yrs	2021/22	525.4	5/16	398.1	752.4	762.8	_	
Admissions for lower respiratory tract infections (aged 1 year)	Ρ	1 yr	2021/22	Null	Null	Null	Null	167.8	_	
Average Attainment 8 score		Ρ	15-16 yrs	2021/22	56.2	1/16	56.2	46.3	48.7		
C09a - Reception: Prevalence of overweight (inclue	ling obesity)	Ρ	4-5 yrs	2021/22	20.3	5/16	17.3	25.5	22.3		
Children in care		Ρ	<18 yrs	2022	31.0	1/16	31.0	116.0	70.0		
Children in care immunisations		Ρ	<18 yrs	2022	75.0	13/16	100.0	71.0	85.0		
Hospital admissions as a result of self-harm (10	-24 years)	Ρ	10-24 yrs	2021/22	325.1	2/16	269.3	808.8	427.3		
Hospital admissions for mental health cond		Ρ	<18 yrs	2021/22	Null	Null	Null	Null	99.8		
Neonatal mortality and stillbirth rate		Ρ	<28 days	2020	7.4	13/16	2.4	8.1	6.5		
lew referrals to secondary mental health services, per 100,0		Ρ	<18 yrs	2019/20	4,602.8	3/16	2,966.6	10,475.9	6,977.4		
Proportion of children receiving a 12-month review		Ρ	1 yr	2021/22	29.7	16/16	97.4	29.7	82.0		
Proportion of infants receiving a 6 to 8 week review		Ρ	6-8 weeks	2021/22	83.7	13/16	97.6	10.0	81.6		
School pupils with social, emotional and mental health needs:		Ρ	School age	2021/22	2.5	6/16	2.1	3.8	3.0		
B02a - School readiness: percentage of children achieving a go		Ρ	5 yrs	2021/22	70.9	4/16	71.8	63.2	65.2		
CO4 - Low birth weight of term babies		Ρ	>=37 weeks g	2021	2.4	10/16	1.5	2.9	2.8		
C08a - Child development: percentage of children achieving a		Ρ	2-2.5 yrs	2021/22	81.3	12/16	90.1	43.5	81.1	_	
C09b - Year 6: Prevalence of overweight (including obesity)		Ρ	10-11 yrs	2021/22	30.2	3/16	28.4	37.5	37.8		
C05a - Baby's first feed breastmilk		Ρ	Newborn	2020/21	86.1	2/16	88.0	68.6	71.7		
07 - Proportion of New Birth Visits (NBVs) comple	eted within	Ρ	<14 days	2021/22	88.8	7/16	94.8	32.7	82.7		
C11a - Hospital admissions caused by unintention	al and delib	Ρ	0-4 yrs	2021/22	Null	Null	Null	Null	103.6	_	
11a - Hospital admissions caused by unintention	al and delib	Ρ	<15 yrs	2021/22	49.5	1/16	49.5	118.6	84.3		
E01 - Infant mortality rate		Ρ	<1 yr	2019 - 21	2.4	2/16	2.3	6.1	3.9	_	
02 - Percentage of 5 year olds with experience of	isually obv	Ρ	5 yrs	2021/22	15.1	4/13	10.3	38.7	23.7	_	
stimated number of children and young people wi	th mental d	Ρ	5-17 yrs	2017/18	752.2	1/15	752.2	11,023	Null	_	
C06 - Smoking status at time of deliver	y	F	All ages	2021/22	6.8	3/16	5.6	12.4	9.1	_	
D04e - Population vaccination coverage: HPV va		F	12-13 yrs	2021/22	81.7	4/16	90.4	66.4	69.6		
coverage for one dose (12 to 13 year old)		Μ	12-13 yrs	2021/22	81.7	3/16	90.0	50.1	62.4	-	Ó
General fertility rate F		F	15-44 yrs	2021	45.4	1/16	45.4	63.2	54.3	_	
tatistical Significance Better ompared to England or Worse enchmark: Higher	npared	Direction of Travel:			ing and ge	etting better 🔺 l	ncreasing ncreasing and getti ncreasing and getti	ng better 🔛	No significant ch Cannot be calcul		

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

Note: Statistical Significance for indicator D04e is against benchmark goal (<80% worse, 80% to 90% similar, ≥90% better). There are concerns about the quality of the data for indicators C08a and 'Estimated number of children and young people with mental disorders'.

Priority 2: Staying healthy and independent: prevention

- Out of all the comparable indicators presented for the staying healthy and independent: prevention priority, six are green, three are amber and one is red.
- Rutland performed significantly worse than England/benchmark for the following indicator:
 - Population vaccination coverage: Shingles vaccination coverage (71 years) -Rutland is ranked 15th out of 16 in 2021/22. The latest value for Rutland is 32.2%, which is significantly worse than the benchmark of 50%.
- Of all the indicators, Rutland ranks 1st (best/lowest performing) when compared to its similar neighbours for the following indicators:
 - Percentage of adults (aged 18 plus) classified as overweight or obese
 - o Cancer screening coverage: cervical cancer (aged 50 to 64 years old)
- There are currently two indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - o Self reported wellbeing: people with a high anxiety score
 - o 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 R
B19 - Loneliness: Percentage of adults who feel lonely often o always or some of the time	r _P	16+ yrs	2019/20	24.8	13/16	13.9	26.8	22.3	
C16 - Percentage of adults (aged 18 plus) classified as overweight or obese	Ρ	18+ yrs	2021/22	55.5	1/16	55.5	69.4	63.8	
C26b - Cumulative percentage of the eligible population aged 40 to 74 offered an NHS Health Check who received an NHS Health Check	P	40-74 yrs	2018/19 - 22/23	46.1	4/16	111.5	34.9	42.3	
C28d - Self reported wellbeing: people with a high anxiety score	Ρ	16+ yrs	2021/22	29.2	16/16	19.5	29.2	22.6	-
C17a - Percentage of physically active adults	Ρ	19+yrs	2021/22	70.2	10/16	77.3	64.8	67.3	-
C24a - Cancer screening coverage: breast cancer	F	53-70 yrs	2022	71.4	8/16	78.9	54.1	65.2	
C24b - Cancer screening coverage: cervical cancer (aged 25 to 49 years old)	F	25-49 yrs	2022	74.4	8/16	77.0	69.5	67.6	
C24c - Cancer screening coverage: cervical cancer (aged 50 to 64 years old)	F	50-64 yrs	2022	79.5	1/16	79.5	71.4	74.6	
C24d - Cancer screening coverage: bowel cancer	Ρ	60-74 yrs	2022	77.5	2/16	77.6	72.2	70.3	
D06c - Population vaccination coverage: Shingles vaccination coverage (71 years)	n P	71	2021/22	32.2	15/16	59.8	30.0	44.0	
Statistical SignificanceBetterSimilcompared to England orWorseNot ofBenchmark:HigherLowe	compared	Directio	n of Travel:		ig and gett	ting better 🔺 In	creasing creasing and gettir creasing and gettir	ng better 📄	 No significant change Cannot be calculated

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

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

- Out of all the comparable indicators presented for the healthy ageing and living well with long term conditions priority, one is green and three are amber.
- Of all the indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicator:
 - o Percentage of cancers diagnosed at stages 1 and 2
- There are currently no indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing).

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

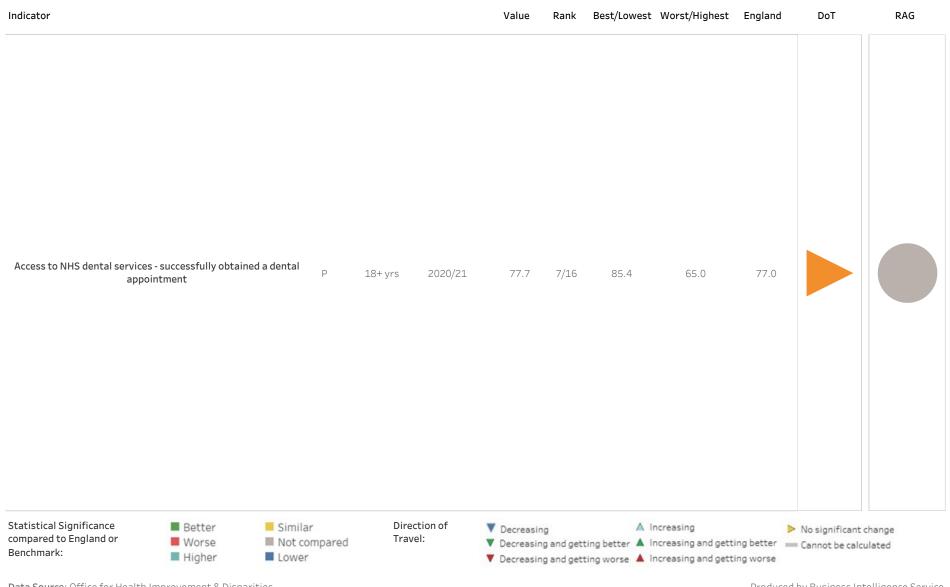
Ranking, Best and Worst columns are compared to the nearest neighbours only. Rank: 1 is calculated as the best (or lowest when no polarity is applied).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
C23 - Percentage of canc	ers diagnosed at stages 1	and 2 P	All ages	2020	57.2	1/15	57.2	49.4	52.3		
C29 - Emergency hospital aged	admissions due to falls in 65 and over	people P	65+ yrs	2021/22	1,565.3	3/16	1,486.9	2,524.7	2,099.9	_	
E13 - Hip fractures i	in people aged 65 and over	P	65+ yrs	2021/22	528.2	7/16	443.4	631.3	551.2	_	
E14 - Winte	er mortality index	Ρ	All ages	Aug 2020 - Ju 2021	^{ار} 33.3	11/16	17.6	61.1	36.2	_	
Statistical Significance compared to England or Benchmark:	BetterWorseHigher	 Similar Not compared Lower 	Dire Trav	el:		g and gett	ting better 🔺 Ir	creasing creasing and getti creasing and getti	ng better	No significant Cannot be calc	

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

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

- 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 7th 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).

Produced by Business Intelligence Service Updated September 2023

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

Priority 5: Preparing for our growing and changing population

- 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.
- Of all the indicators, Rutland ranks 1st (best/lowest performing) when compared to its similar neighbours for the following indicator:
 - o Violent crime violence offences per 1,000 population
- There are currently no indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing).

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
	rticulate matter (new method - tions of total PM2.5)	N/A	Not applicable	2021	6.9	8/16	5.7	7.7	7.4	_	
Average	e weekly earnings	Ρ	16+ yrs	2021	551.3	4/16	575.3	402.7	496.0		
B12b - Violent crime - viol	ence offences per 1,000 populati	on P	All ages	2021/22	17.3	1/16	17.3	38.9	34.9		
	w income, low energy efficiency ethodology)	N/A	Not applicable	2021	12.9	12/16	6.7	19.2	13.1	_	
Percentage of adults cycli	ng for travel at least three days week	per P	16+ yrs	2019/20	1.1	11/16	3.1	0.6	2.3		
	rcentage of adult carers who have ontact as they would like	eas P	18+ yrs	2021/22	27.0	8/16	38.4	16.0	28.0		
physical or mental long te	yment rate between those with a erm health condition (aged 16 to 6 erall employment rate		16-64 yrs	2021/22	6.8	3/16	6.3	14.4	9.9	_	
	ouseholds owed a duty under the sness Reduction Act	e N/A	Not applicable	2021/22	6.1	3/15	4.4	13.5	11.7		
Statistical Significance compared to England or Benchmark:	Worse 🔳 N	Similar Not compa .ower	Directio Travel:			ing and g	etting better	 Increasing Increasing and Increasing and 		er — Cannot	nificant change t be calculated

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

- 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 14th 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 2nd out of 16 in 2021. The proportion of deaths that occur in 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.

Best/Lowest Worst/Highest RAG Indicator Value Rank England DoT Percentage of deaths that occur at home 2021 33.6 16/16 23.0 33.6 28.7 Ρ All ages Percentage of deaths that occur in care homes Ρ 2021 28.0 14/16 15.1 30.3 20.2 All ages 34.9 Percentage of deaths that occur in hospital 2021 35.5 2/16 48.5 44.0 Ρ All ages Temporary Resident Care Home Deaths, Persons, All Ages (%) 10/16 50.8 39.6 Ρ All ages 2021 39.8 30.7 Statistical Significance Better Similar Direction of ▲ Increasing V Decreasing > No significant change compared to England or Travel: Worse Not compared ▼ Decreasing and getting better ▲ Increasing and getting better ── Cannot be calculated Benchmark: Higher Lower Decreasing and getting worse Increasing and getting worse

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

- Out of all the comparable indicators presented for supporting mental health, three are green, seven are amber and four are not comparable.
- Of all the indicators, Rutland ranks 1st (best/lowest performing) when compared to its similar neighbours for the following indicators:
 - o Emergency Hospital Admissions for Intentional Self-Harm (Males)
 - o Admission episodes for alcohol-related conditions (Broad)
- There is currently one indicator where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - o Self reported wellbeing: people with a high anxiety score

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
	nxiety among social care users: % of :ial care users	Ρ	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		
B18a - Social Isolation: percentage of adult social care users who have as much social contact as they would like		P	18+ yrs	2021/22	39.5	9/16	47.2	34.8	40.6		
	·		65+ yrs	2021/22	31.8	3/16	27.3	46.4	37.3		
B18b - Social Isolation: percentage of adult carers who have as much social contact as they would like		Ρ	18+ yrs	2021/22	27.0	8/16	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	2021/22	106.4	2/16	102.9	279.3	163.9		
		F	All ages	2021/22	150.1	2/16	136.4	408.1	220.1		
		Μ	All ages	2021/22	70.8	1/16	70.8	214.1	109.2		
C28d - Self reported wellbeing: people with a high anxiety score		Ρ	16+ yrs	2021/22	29.2	16/16	18.2	29.2	22.6		
C17a - Percentag	e of physically active adults	Ρ	19+ yrs	2021/22	70.2	10/16	77.3	64.8	67.3		
Depression: Q	QOF prevalence (18+ yrs)	Ρ	18+ yrs	2021/22	11.2	2/16	10.9	14.9	12.7		
Mental Health: QOF prevalence (all ages)		Ρ	All ages	2021/22	0.7	3/16	0.7	1.2	1.0		
Admission episodes for	alcohol-related conditions (Broad)	Ρ	All ages	2021/22	1,068.2	1/15	1,068.2	1,869.1	1,734.5		
Statistical Significance compared to England or Benchmark:	BetterSimWorseNotHigherLow	compared Travel:						 Increasing better Increasing and getting better worse Increasing and getting worse 			ificant change be calculated

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

Note: RAG/Statistical Significance for indicator C14b in females should be similar. Rank for 'Admission episodes for alcohol-related conditions (Broad)' should be 1/16. There are concerns about the quality of the data for indicator 90535.

Reducing Health Inequalities

- Out of all the comparable indicators presented for reducing health inequalities, one is green, one is amber and two are not comparable.
- Of all the indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicators:
 - o Healthy life expectancy at birth (Males)
 - o Life expectancy at birth (Males)
- There are currently no indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing).

Indicator Value Rank Best/Lowest Worst/Highest England DoT RAG A01a - Healthy life expectancy at birth F All ages 2018 - 20 66.8 8/16 70.1 62.6 63.9 74.7 Μ 61.8 All ages 2018 - 20 74.7 1/16 63.1 A01b - Life expectancy at birth F All ages 2018 - 20 85.0 3/16 85.2 83.4 83.1 Μ All ages 2018 - 20 83.2 1/16 83.2 79.6 79.4 Statistical Significance Direction of Better Similar A Increasing V Decreasing No significant change compared to England or Travel: ▼ Decreasing and getting better ▲ Increasing and getting better ── Cannot be calculated Not compared Worse Benchmark: Decreasing and getting worse Increasing and getting worse Higher Lower

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).

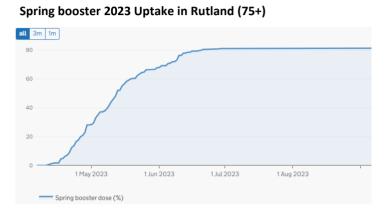
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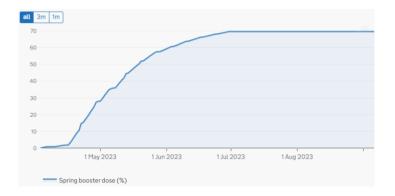
Covid Recovery

• COVID-19 vaccinations (% Uptake)

The Covid-19 vaccination uptake in Rutland is higher than England for the spring 2023 booster dose (75+), as of 6th September 2023. 81.3% of over 75s in Rutland have had their 2023 spring booster compared to 69.5% nationally.



Spring booster 2023 Uptake in England (75+)



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

• COVID-19 Deaths**

As of week 35, in 2023, there have been a total of 118 Covid-19 deaths in Rutland. Of the total deaths involving Covid-19 in Rutland, 63 (53.4%) were in a hospital setting and 44 (37.3%) were in a care home setting.

Since the beginning of the pandemic (week 12, 2020) there have been a total of 1,555 deaths (all causes) in Rutland.

Based on the average mortality data for 2017-22 (excl 2020), we would expect 1,416 deaths in Rutland for this period. This reveals an excess of 139 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:

- Bath and North East Somerset
- Buckinghamshire UA
- Central Bedfordshire
- Cheshire East
- Cheshire West and Chester
- Cornwall
- Dorset
- East Riding of Yorkshire
- Herefordshire
- Isle of Wight
- North Somerset
- Shropshire
- Solihull
- West Berkshire
- Wiltshire



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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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