

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

Rutland

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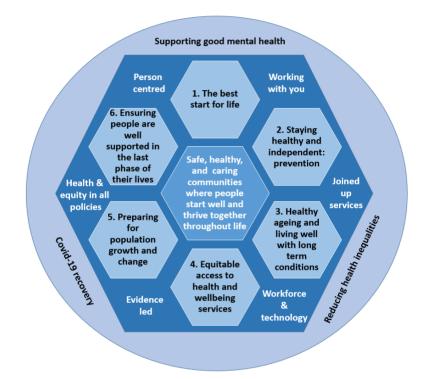
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Purpose of Report

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 indicators: School readiness: percentage of children achieving a good level of development at the end of reception and Hospital admissions caused by unintentional and deliberate injuries in children (0-14 years).
- There are currently six indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - o Neonatal mortality and stillbirth rate
 - Proportion of children receiving a 12-month review
 - o Children in care immunisations
 - HPV Vaccination coverage for one dose (12-13 year) (Females)
 - HPV Vaccination coverage for one dose (12-13 year) (Males)
 - o 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).

Indicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG	
C04 - Low birth weight of term babies		P :	>=37 weeks g	2020	1.7	2/16	1.3	2.9	2.9			
C09a - Reception: Prevalence of overweight (includ	ding obesity)	Ρ	4-5 yrs	2021/22	20.3	5/16	17.3	25.5	22.3			
New referrals to secondary mental health services	s, per 100,0	Р	<18 yrs	2019/20	4,602.8	4/16	2,966.6	10,475.9	6,977.4			
A&E attendances (0-4 years)		Ρ	0-4 yrs	2019/20	397.6	4/16	316.1	679.0	659.8			
dmissions for lower respiratory tract infections in	n infants ag	Ρ	<1 yr	2020/21	Null	Null	Null	Null	94.9			
Neonatal mortality and stillbirth rate		Р	<28 days	2019	7.1	15/16	3.1	9.7	6.6			
Proportion of children receiving a 12-month	review	Ρ	1 yr	2021/22	29.7	16/16	97.4	29.7	81.9			
C05a - Baby's first feed breastmilk		Р	Newborn	2018/19	77.6	3/16	79.6	63.0	67.4	-		
Children in care immunisations		Ρ	<18 yrs	2021	62.0	16/16	100.0	62.0	86.0	_		
General fertility rate		F	15-44 yrs	2020	47.3	1/16	47.3	64.2	55.3			
Proportion of infants receiving a 6 to 8 week	review	Ρ	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		Ρ	5-17 yrs	2017/18	752.2	1/14	752.2	9,588.2	Null			
Average Attainment 8 score		Ρ	15-16 yrs	2020/21	54.3	2/16	56.7	48.4	50.9			
CO6 - Smoking status at time of delivery		F	All ages	2021/22	6.8	3/16	5.6	12.4	9.1	_		
07 - Proportion of New Birth Visits (NBVs) comple	eted within	Ρ	<14 days	2021/22	88.8	6/16	94.8	32.7	82.6			
C08a - Child development: percentage of children a	achieving a	Ρ	2-2.5 yrs	2021/22	81.3	11/16	90.1	43.5	80.9			
C09b - Year 6: Prevalence of overweight (includin	ng obesity)	Ρ	10-11 yrs	2021/22	30.2	2/16	28.4	39.1	37.8			
Children in care		Ρ	<18 yrs	2021	43.0	5/16	37.0	111.0	67.0			
D04e - Population vaccination coverage: HPV va		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	d)	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 obv	Ρ	5 yrs	2018/19	25.3	10/11	13.1	31.9	23.4	_		
302a - School readiness: percentage of children acl	hieving a go	Ρ	5 yrs	2018/19	77.8	1/16	77.8	69.1	71.8			
C11a - Hospital admissions caused by unintention	al and delib	Ρ	0-4 yrs	2020/21	84.5	1/16	84.5	145.3	108.7			
C11a - Hospital admissions caused by unintention	al and delib	Ρ	<15 yrs	2020/21	49.6	1/16	49.6	97.5	75.7			
E01 - Infant mortality rate		Ρ	<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) \times		Ρ	10-24 yrs	2020/21	309.9	2/16	304.2	794.5	421.9			
Hospital admissions for mental health conditions		Ρ	<18 yrs	2020/21	127.4	12/16	72.9	251.0	87.5			
School pupils with social, emotional and mental health needs: $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		School age	2021	2.4	7/16	1.9	3.5	2.8				
Statistical SignificanceBetterSimilarcompared to England orWorseNot comparedBenchmark:HigherLower			Directio	on of Travel:	 Decreasing Decreasing and getting better Increasing and getting better Decreasing and getting worse Increasing and getting worse 					No significant change Cannot be calculated		

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, four are green, three are amber and three 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 2017/18-2020/21. The latest value for Rutland is 38.6%, which is significantly worse than the national average of 44.8%.

Cancer screening coverage - breast cancer – Rutland is ranked 15th out of 16 in 2021. The latest value for Rutland is 58.2%, which is significantly worse than the national average of 64.1%.

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 national average of 48.2%.

- 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
 - Cancer screening coverage breast cancer
 - 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).

ndicator					Value	Rank	Best/Lowest	Worst/Highest	England	DoT	RAG
	e of adults who feel lonely ofte ome of the time	n/ P	16+ yrs	2019/20	24.8	14/16	13.9	26.7	22.3		
	ged 18+) classified as overwei obese	ght P	18+ yrs	2020/21	59.5	2/16	59.0	68.3	63.5		
40-74 offered an NHS Heal	je of the eligible population ag Ith Check who received an NHS th Check		40-74 yrs	2017/18 - 21/22	38.6	14/16	82.0	34.8	44.8		
	ing: people with a high anxiet	У _Р	16+ yrs	2020/21	19.5	2/15	19.4	26.4	24.2		
C17a - Percentage of	f physically active adults	Ρ	19+ yrs	2020/21	74.0	1/16	74.0	64.4	65.9		
C24a - Cancer screenin	ng coverage: breast cancer	F	53-70 yrs	2021	58.2	15/16	78.1	58.2	64.1		
	erage: cervical cancer (aged 25 ears old)	to _F	25-49 yrs	2021	75.0	8/16	77.0	68.2	68.0		
	rage: cervical cancer (aged 50 ears old)	to _F	50-64 yrs	2021	79.6	1/16	79.6	73.7	74.7		
C24d - Cancer screenir	ng coverage: bowel cancer	Ρ	60-74 yrs	2021	71.1	2/16	72.2	65.3	65.2		
	n coverage: Shingles vaccinati e (71 years)	on P	71	2019/20	31.4	16/16	56.8	31.4	48.2		
Statistical Significance compared to England or 3enchmark:	Better Sir Worse No Higher Low	t compared	Directio	n of Travel:		ng and gett	ting better 🔺 In	creasing creasing and gettin creasing and gettin	ng better 📲	No significant cha Cannot be calculat	

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

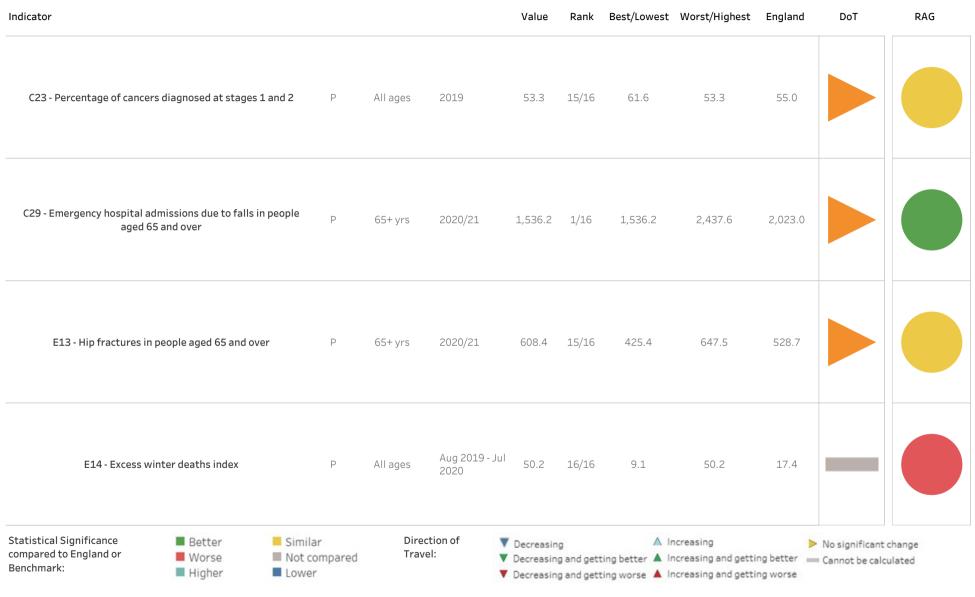
- Out of all the comparable indicators presented for the healthy ageing and living well with long term conditions priority, one is green, two are amber and one is red.
- Rutland performed significantly worse than England/benchmark for the following indicator:

Excess winter deaths index – Rutland is ranked 16th out of 16 in 2019/20. 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 three indicators where, when compared to similar areas, Rutland performs in the bottom three (worse performing):
 - Percentage of cancers diagnosed at stages 1 and 2
 - o 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).

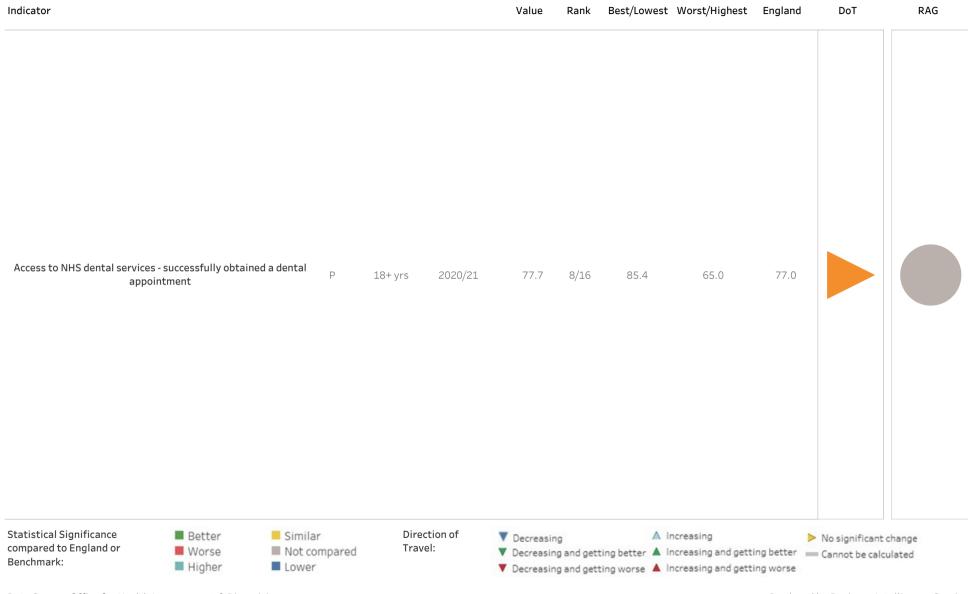


Data Source: Office for Health Improvement & Disparities https://fingertips.phe.org.uk/

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	iculate 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 - viol	lence 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	2020/21	4.9	2/16	2.7	15.0	11.3		
	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	2018/19	38.2	2/15	38.7	11.7	32.5		
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:	BetterSimilaWorseNot cHigherLowe	ompai	Directio Travel:	n of		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

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 29.3 Temporary Resident Care Home Deaths, Persons, All Ages (%) Ρ All ages 2020 3/16 26.3 45.6 35.2 Statistical Significance Direction of Better Similar 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 and six are amber.
- Of the four green indicators, Rutland ranks 1st (best performing) when compared to its similar neighbours for the following indicators: Admission episodes for alcohol-related conditions (Broad): New method Percentage of physically active adults Emergency Hospital Admissions for Intentional Self-Harm (Persons) Emergency Hospital Admissions for Intentional Self-Harm (Females)

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
B11 - Domestic abuse-related incidents and crimes	Ρ	16+ yrs	2020/21	23.1	2/16	22.5	37.3	30.3	_	
B18a - Social Isolation: percentage of adult social care users who have as much social contact as they would like	Ρ	18+yrs	2019/20	48.6	5/16	54.4	39.3	45.9	_	
		65+ yrs	2019/20	45.5	13/16	34.3	48.5	43.4		
B18b - Social Isolation: percentage of adult carers who have as much social contact as they would like	Ρ	18+yrs	2018/19	38.2	2/15	38.7	11.7	32.5	_	
		65+ yrs	2018/19	34.1	13/15	13.4	42.1	34.5	_	
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 wellbeing: people with a high anxiety score	Ρ	16+yrs	2020/21	19.5	2/15	19.4	26.4	24.2	_	
90535 - Depression and anxiety among social care users: % of social care users	Ρ	18+ yrs	2018/19	44.5	2/14	43.9	58.8	50.5		
Depression: QOF prevalence (18+ yrs)	Ρ	18+yrs	2021/22	11.2	2/14	10.9	14.9	12.7		
Mental Health: QOF prevalence (all ages)	Ρ	All ages	2021/22	0.7	3/14	0.7	1.2	1.0		
Admission episodes for alcohol-related conditions (Broad): New method. This indicator uses a new set of attributable fra	Ρ	All ages	2020/21	1,018.8	1/16	1,018.8	1,659.5	1,499.8		

Note: The rankings for B18a (65+ yrs) and B18b (65+ yrs) should be 4/16 and 3/15 respectively, not 13/16 and 13/15. Their Best/Lowest and Worst/Highest values should also be swapped.

Statistical Significance compared to England or Benchmark:

 Better
 Similar

 Worse
 Not compared

 Higher
 Lower

Direction of Travel:

Decreasing

A Increasing

No significant change

▼ Decreasing and getting better ▲ Increasing and getting better ── Cannot be calculated

▼ Decreasing and getting worse ▲ Increasing and getting worse

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 I	ife expectancy at birth	n F	All ages	2018 - 20	66.8	9/16	70.1	59.3	63.9		
		M	All ages	2018 - 20	74.7	1/16	74.7	61.9	63.1		
A01b - Life e	expectancy 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		
Jote: For A01b - Life expecta Statistical Significance ompared to England or Benchmark:	ncy at birth for males, Better Worse Higher	the Worst/Highest value Similar Not compared Lower		ion of		g and gett	ting better 🔺 Ir	ncreasing increasing and gettin increasing and gettin		No significant Cannot be calc	
Data Source: Office for Healt https://fingertips.phe.org.uk	h Improvement & Disp									ed by Business In Update	telligence Servio ed December 202

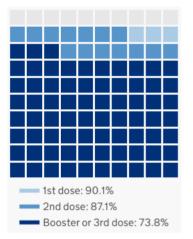
Covid Recovery

• 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 22nd December 2022. 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.

Covid-19 Vaccination Uptake in Rutland (12+)

Covid-19 Vaccination Uptake in England (12+)



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

• COVID-19 Hospital Admissions at University Hospitals of Leicester (UHL)**

From March 2020 to 10th December 2022 (since the start of the pandemic), there have been a total of 128 hospital admissions with Covid-19 at UHL from Rutland residents. Out of the 128 admissions, 77% were aged over 60 and 23% were aged under 60. It is important to note that Rutland residents would also attend other hospitals across the border.

COVID-19 Deaths***

As of week 48 in 2022, there have been a total of 108 Covid-19 deaths in Rutland. Of the total deaths involving Covid-19 in Rutland, 55 (50.9%) were in a hospital setting and 43 (39.8%) were in a care home setting.

Since the beginning of the pandemic (week 12, 2020) there have been a total of 1145 deaths (all causes) in Rutland.

Based on the average mortality data for 2015-19, we would expect 1021 deaths in Rutland for this period. This reveals an excess of 124 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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