



REPORT OF THE CHAIR OF THE HEALTH & WELLBEING BOARD

CHAIR'S REPORT

Purpose of the Report

1. The report provides an update by the Chair on local and national issues for consideration by Health & Wellbeing Board members to determine implications for Board matters.

Information

[Refresh of the Local Outbreak Plan for Nottinghamshire](#)

2. Nottinghamshire County Council first produced its Local Outbreak Control Plan (LOCP) in June 2020 as part of a national strategy to reduce infection from COVID-19. In March 2021, local plans were refreshed, incorporating the learnings of the past nine months and planning for the next phase of the response.
3. For more information, please read the refreshed [Local Outbreak Plan](#).

[Delivering the Domestic Abuse Duty in Nottinghamshire](#)

4. The new [Domestic Abuse Act](#) was signed into law on 29 April 2021. It has created a statutory definition of domestic abuse, established a Domestic Abuse Commissioner along with enhancing legal processes, and has placed a duty on local authorities in England to provide support to survivors of domestic abuse and their children in refuges and other safe accommodation.
5. The Ministry of Housing, Communities and Local Government (MHCLG) have allocated £1,540,091 per annum to Nottinghamshire County Council for the delivery of this domestic abuse duty. They have also allocated a further £223,315 to the districts to deliver their contributions to the delivery of the duty, who are required to work in partnership with Nottinghamshire County Council via the Domestic Abuse Local Partnership Board.
6. Lead authorities, in this case Nottinghamshire County Council, are to convene a multi-agency Board to perform specified functions, as outlined and explained in statutory guidance that include:
 - a) Assessing the need and demand for accommodation-based support for all victims and their children, including those who require cross-border support.

- b) Developing and publishing strategies for the provision of support to cover the locality and diverse groups of victims.
 - c) Make commissioning / de-commissioning decisions.
 - d) Meet the support needs of victims and their children.
 - e) Monitor and evaluate local delivery.
 - f) Report back to central Government.
7. Nottinghamshire County Council have already established the Local Partnership Board in conjunction with the Domestic and Sexual Abuse Executive Group and held a workshop in May with stakeholders to review the needs assessment. This engagement will inform the commissioning plan, which is under development and due to be taken to Adult Social Care and Health Committee for approval in July 2021.
8. A report outlining the commissioning plan and needs assessment will be brought to a future meeting of the Health and Wellbeing Board for information. This will contribute to the Board's commitment to tackle domestic abuse and support survivors and their families in Nottinghamshire and the delivery of the Joint Health and Wellbeing Strategy.
9. For more information, please contact Rebecca.Atchinson@nottscc.gov.uk

[Violence against Womens and Girls Strategy, Nottingham and Nottinghamshire 2021 - 2025](#)

10. In April 2021, the Office of the Police and Crime Commissioner published the Violence against Women and Girls Strategy for Nottingham and Nottinghamshire 2021 – 2025, with the vision to *“Working together to end violence against women and girls in Nottingham and Nottinghamshire through a gender-informed approach”*. It aims to:
- a) Improve the joint understanding of VAWG as gender-informed across Nottingham and Nottinghamshire as expressed in our strategic planning and service delivery.
 - b) Increase the effectiveness of our local response to VAWG.
 - c) Maintain specific domestic violence and abuse, sexual violence and abuse, hate crime and other strategies to ensure the detail and specificity of those approaches is retained and to accommodate a wider Consideration of gender in those approaches.
11. For more information, please contact nopcc@nottinghamshire.pnn.police.uk

Funding for substance misuse interventions in Nottinghamshire

12. Nottinghamshire County Council has been awarded £810,472 over a 12 month period to fund substance misuse interventions. This funding is part of the government announced additional £80 million to fund drug treatment in 2021/22, as part of a £148 million funding package for reducing crime. This is the biggest increase in drug treatment funding for 15 years. The £80 million is new funding for one year to enhance drug treatment, focused on reducing drug-related crime and the rise in drug-related deaths.
13. The £810,472 is split between an ‘universal’ allocation (£549K) and in patient detoxification allocation from drugs and alcohol (£358531.5) for medically managed interventions which is based on a Nottinghamshire County and Nottingham City consortium.

14. The universal allocation aim is to reduce drug related deaths and improvements in access to substance misuse services for those within the criminal justice system and public health are working with Change Grow Live the All age Substance Misuse treatment and Recovery provider to mobilise a series of evidence based interventions over the 12 months.
15. The inpatient detoxification allocation will be awarded to Framework's Edwin house which is the only medically managed detoxification unit regionally and will provide swift access to detoxification for Nottinghamshire county's residents.
16. For more information, please contact sarah.quilty@nottscg.gov.uk

The Nottinghamshire Healthcare NHS Foundation Trust Healthy Family Teams Digital Offer

17. The Healthy Families Programme is commissioned by Nottinghamshire County Council Public Health to deliver the Department of Health 0-19 Healthy Child Programme and provide a range of support for children and young people, from before birth to their late teens, and their families. Nottinghamshire Healthcare NHS Foundation Trust provide this integrated service and there are 20 locally based [Healthy Family Teams](#) across Nottinghamshire.
18. In response to both the Covid 19 pandemic and the changing needs of families, the Healthy Family Teams have been developing their digital offer and local information and advice for children, young people and families in Nottinghamshire is now available on three national websites;
- [Health for Under 5s](http://healthforunder5s.co.uk) (healthforunder5s.co.uk)
 - [Health for Kids](http://healthforkids.co.uk) (healthforkids.co.uk)
 - [Health for Teens](http://healthforteens.co.uk) (healthforteens.co.uk)
19. Interested local services can get in contact with the Healthy Family Teams Media Officer David Godsall at David.godsall@nottshc.nhs.uk to submit new article ideas.
20. The Healthy Family Teams are piloting a Digital Questionnaire with all Year 9 pupils at one Nottinghamshire school in Bassetlaw in May, encouraging pupils to complete a range of questions about their health and wellbeing. This will be followed by approximately six participating schools, with a view to a full rollout across the county from September. The questionnaires will allow young people to engage with the Healthy Family Teams in a confidential manner and cases will be followed up where concerns are raised or identified.
21. For more information, please contact Kate.Whittaker@nottscg.gov.uk

Nottingham & Nottinghamshire Food Insecurity Network

22. The Covid 19 pandemic has shone a light on food inequality and food insecurity. The Nottingham & Nottinghamshire Food Insecurity Network was formed in response to this and aims to improve access to affordable healthy food. This builds on the wider Food Environment work previously undertaken the Healthy and Sustainable Places priority of the Health and Wellbeing Strategy 2018-2022 and the work of the Community Hub of the Local Resilience Forum (LRF).

23. The Network brings together a range of partners from the Community and Voluntary sector, City, County and District/Borough Councils working on food related issues with an inclusive and collaborative approach. Organisations representing food banks, social eating, community allotments/ gardens, School Meals, social supermarkets and more form a wide-reaching membership. The current priorities focus on food growing; food distribution; social eating; food education and food waste. The work also aligns with aspects of the county's Child Obesity Trailblazer project with focuses on improving the food environment as a driver of obesity in the early years.
24. The Network is working to align food priorities with environmental and economic strategies in partner organisations in recognition of the inter connectivity of the food system on wider agendas.
25. For more information, please contact Kathy.holmes@nottsc.gov.uk

Bassetlaw District Council Health and Wellbeing Update: Partnership Working

26. **Low Intensity Activities Resume in Bassetlaw** - Bassetlaw District Council (BDC) have partnered with Get Out Get Active (GOGA), BCVS, Barnsley Premier Leisure (BPL) and event organisers across the district to produce an [accessible informational poster](#), notifying Bassetlaw residents of the low intensity activities resuming in Bassetlaw. The activities are aimed at building self-confidence and supporting the safe return to outdoor exercise sessions and numerous walking sports activities have already resumed in Retford, Worksop and surrounding areas and all have been welcomed by residents;

Attendee Testimony – ‘The Smiley Milers has given me something to look forward to again and I don’t feel as lonely as I used to. I am glad I saw the poster on social media because I can stay active while meeting up with a great bunch of lads, it’s just what I needed’.

27. **Health and Wellbeing Campaigns** - National, regional and local health and wellbeing campaigns are an integral part of the Health and Wellbeing calendar in Bassetlaw and promoted by partners in The BDC Health & Community Delivery Group every year. The Council has supported numerous campaigns during the pandemic including [Mental Health Awareness Week](#), [Stress Awareness Month](#) and [UK Maternal Mental Health Matters](#).
28. **Mental Health and Smoking** - Research from [Mind](#) found 1 in 6 people in England experience mental health problems, such as anxiety and depression, and approximately only 1 in 8 people seek treatment, with [psychiatric medication](#) being the primary treatment. Recreational drugs such as nicotine can be incorrectly assumed to ‘help cope’ with life’s difficulties and research from [The Mental Health Foundation](#) has shown nicotine increases anxiety and tension.
29. This research reflects the greater risk for people who smoke of developing physical and mental health issues, as well as serious adverse effects from Covid-19 accordant with [WHO](#). BDC discussed mental health and smoking cessation with Your Health Your Way (ABL Health) and has retained resources and [referral forms](#) for the [smoking cessation programme](#). This involves Nicotine Replacement Therapy and Talking Therapy and these self-referral forms are being distributed by BDC to those who wish to stop smoking.
30. **Cycling UK and Bassetlaw District Council Partnership** - BDC are working with [Cycling UK](#) and [Retford Bike Pedlars](#) to provide free Dr Bike sessions at the Worksop and Retford Market

as part of the [Big Bike Revival Programme](#). Exercise is known to reduce anxiety and stress, and cycling can also be a social sport too.

31. Research from [Cycling UK](#) found in 2019 those with a high level of income travel by bicycle more than those in the lowest income bracket. Although the [Office for National Statistics](#) found the weekly expenditure of bicycles to be low, Cycling UK recognises to initially purchase a bike, maintain and repair the bike takes time, money and to some extent skill which affects those with a low income.
32. Dr Bike pop up sessions carry out free maintenance checks and minor repairs to get Bassetlaw back on their bikes and encourage people to cycle more often. After the successful partnership with Cycling UK, BDC are delighted to have applied for a further grant to provide Dr Bike sessions again for 2021 and 2022.
33. For more information, please contact katie.brown@bassetlaw.gov.uk

Mid Nottinghamshire Partnership Update

34. The six Primary Care Networks in Mid Nottinghamshire, Mid Nottinghamshire Locality Team in the CCG and the Integrated Care Partnership have undertaken positive partnership work that is successfully contributing towards the delivery of the Joint Health & Wellbeing Strategy for Nottinghamshire. The work aims to improve health and wellbeing, reduce health inequalities and promote the integration of services and includes:
35. **Virtual Ward** – This provides a step down mechanism to enable earlier and safe discharge initially for COVID positive patients, using home oxygen saturation monitoring. Over 20 people have safely been monitored at home and discharged from home.
36. **Pulse Oximeter at Home** – A step up service to monitor patients at home using pulse oximetry and prevent hospital admission by safely detecting early signs of deterioration. Over 100 patients have now gone through the service and safely discharged.
37. **Care Homes** - 126 care homes are aligned to practices with a designated care home lead and effective multidisciplinary teams (MDT) in place. A monthly Mid Nott's Care Home Operational Group has been established to provide oversight, share intelligence, co-ordinate action and learning.
38. **Social Prescribing** - 21 social prescribing link workers have been embedded into primary care, working with our provider Primary Integrated Community Services Ltd who are delivering some excellent outcomes for patients.
39. **Covid Vaccinations** – There has been continued support to the Covid response, supporting Covid Vaccination Centres, delivery of 'pop-up' clinics located in general practice, vaccinations within the care homes, to housebound patients, as well as supporting uptake in hard to reach groups.
40. **Health Inequalities** – A Mid Nott's Health Inequalities Oversight Group has been launched - The initial focus has been on covid vaccination equity, mobilising coordinated action and community champions, supporting the covid vaccination bus in addition to launching a pilot schemes, to tackle fuel poverty and support disability employment/access to work.

41. **Delivery at PLACE and Neighbourhood level** – Mid Nott's ICP are working with ICP colleagues from the City and South, CCG colleagues and system partners to identify the implications of the White Paper: Integration and Innovation: working together to improve health and social care for all, and to determine how the role of the ICP can support and influence the delivery of place based models that will meet the needs of the local population and contribute to the delivery of joint strategies.
42. **Identifying our Priorities** – Mid Nott's ICP have identified a set of priorities for 2021/22 that will focus on Population Health Management, PCNs and Community Assets, End of Life Services, MSK Services, a care home model for the future, community mental health transformation, and discharge to assess, to further contribute to the Health and Wellbeing Strategy and continue to strengthen the ICPs work around its strategic objectives to build "healthier and happier communities".
43. For more information, please contact:
David Ainsworth, Locality Director, david.ainsworth@nhs.net
Lorraine Palmer, Interim Programme Director, lorraine.palmer2@nhs.net
Leanne Monger, Deputy Locality Director, leanne.monger1@nhs.net

[Public Health England \(PHE\) Vaping in England 2021: Evidence Update Summary](#)

44. In February 2021, Public Health England (PHE) published its seventh annual evidence report into e-cigarettes in England. The report investigates e-cigarette use in adults and young people and examines evidence on the effectiveness of e-cigarettes in helping people to stop smoking.
45. Smoking remains the largest single risk factor for death and years of life lived in ill health and is a leading cause of health inequalities in England and other parts of the world.
46. The findings of the report showed that for both adults and young people (11-18 year olds), the number of people who smoke has continued to fall, while the proportion of people who use e-cigarettes has plateaued since the last report. Most people who use e-cigarettes are current or ex-smokers. Similar to smoking, e-cigarette use in adults was more common among disadvantaged groups.
47. E-cigarettes were also found to be effective at helping people cut-down or stop smoking. E-cigarettes were the most popular stop-smoking aid. For all regions in England, quit rates involving e-cigarettes were higher compared to other methods.
48. The report suggests the combination of e-cigarettes, with stop smoking service support (the most effective type of support) should be available to all people who want to quit smoking. The report recommends that local authorities should continue to fund and provide stop smoking services and all stop smoking services should have a consistent approach to using vaping products.
49. Residents of Nottinghamshire County Council who wish to stop smoking can access free smoking cessation support via Your Health Your Way Telephone 01157722515 or yourhealth.notts@ablhealth.co.uk or <https://yourhealthnotts.co.uk>
50. For more information, please contact Karielle.Webster@nottsccl.gov.uk

Update to the Nottinghamshire Pharmaceutical Needs Assessment 2018 - 21

51. The Pharmaceutical Needs Assessment 2018-2021 (PNA) for Nottinghamshire was published in April 2018 following approval by the Health and Wellbeing Board in March 2018.
52. The PNA describes available pharmaceutical services across Nottinghamshire County and assesses whether these services meet the needs of the population. The PNA is a statutory responsibility of the Health and Wellbeing Board, governed by Regulations issued by the Department of Health. These Regulations require that periodic Supplementary Statements are prepared and published where there are changes to pharmaceutical services which do not warrant a complete review of the PNA.
53. As approved by the Health and Wellbeing Board on 6 January 2021, supplementary statements produced quarterly, are shared with the Health and Wellbeing Board in the form of an update in the Chairs Report and published on Nottinghamshire insight. This will enable supplementary statements to be published as soon as possible, at the end of each quarter.
54. The Supplementary Statement for the last quarter, summarising changes to pharmaceutical services from January 2021 to March 2021, is provided in **Appendix 1**. All the reported changes during this period were in relation to reduction in the supplementary hours. The PNA does not identify any significant gaps in pharmaceutical services for the Nottinghamshire County population.
55. At any point should it be felt that information within the supplementary statement identifies a significant gap in pharmaceutical services, it will be presented as a paper to Health and Wellbeing Board, instead of an update in the Chair's Report.
56. For more information, please contact Mina.fatemi@nottscc.gov.uk

Tackling Loneliness

57. This briefing paper has been published by The House of Commons Library. The Government's Loneliness Strategy was published in October 2018. It set out a wide variety of cross-departmental measures that the Government would take to provide 'national leadership' to tackle loneliness in England. As well as explaining the Strategy and the steps taken so far by the Government, this briefing also looks at research into the causes and impact of loneliness and possible interventions. The impact of the Covid-19 pandemic on loneliness is also considered, alongside the measures introduced by the Government in response.

A connected recovery: Findings of the APPG on loneliness enquiry

58. This inquiry makes the case for a 'connected recovery' from the Covid-19 pandemic. It explored problems and identified solutions within four crucial policy areas, including: translating national policy into local action through local authorities; community infrastructure (including housing, transport and public spaces); how to adequately fund the voluntary and community sector upon which social prescribing depends; and designing and implementing ways to test the implications of government policies on loneliness.

[Preventing suicide in England: fifth progress report of the cross government outcomes strategy to save lives.](#)

59. This report published by the Department of Health and Social Care details the steps taken to reduce deaths by suicide since 2019. It sets out the data and evidence on suicide and self-harm; the progress made against existing commitments designed to prevent suicides and self-harm; and further actions for the government and its agencies, particularly in the context of Covid-19.

[Working together to improve health and social care for all](#)

60. This government White Paper, published by the Department of Health and Social Care, sets out legislative proposals for a Health and Care Bill. The proposals are designed to support the health and care system to work together to provide high-quality health and care, so people can live longer, healthier, active, and more independent lives. Many of the proposals build on the NHS's recommendations in its long-term plan.

[PHE Healthy places](#)

61. This guidance, published by Public Health England, provides an overview of the work completed by a designated team from 2013 to date.

[Places, spaces, people and wellbeing and Community hubs and green spaces](#)

62. These briefings and reports have been published by the What Works Centre for Wellbeing. This resource consists of a systematic review and briefing on social relations: Places, spaces, people and wellbeing. There is also a case study synthesis and briefing: community hubs and green spaces.

[This report comes with a health warning: the impact of climate change on public health](#)

63. This report has been published by the UK Health Alliance on Climate Change. It finds that the health of more than 12 million people is vulnerable to the impacts of climate change, such as heatwaves and floods. It studies the benefit of a net zero economy and active travel on health and the role of the NHS and health professionals on reaching this target.

[The invisible threat: how can we protect people from air pollution and create a fairer, healthier society](#)

64. The invisible threat is a health emergency. It is harmful for everyone, but some groups are being hit hardest – pregnant women, children, older people, those living with lung conditions and those on the lowest incomes. This report published by Asthma UK sets out new analysis that shows that people who are the most susceptible are being exposed in the places that should feel most safe. It calls for politicians to commit to air pollution health protection plans and stronger cleaner air laws.

[Close to home delivering a national Housing First programme in England](#)

65. This report published by the Centre for Social Justice makes the case for a national Housing First programme and draws on recent learning to map out what this should entail. It argues that

Housing First is an effective way of tackling and preventing rough sleeping for people whose homelessness is compounded by serious mental health issues, drug or alcohol dependency, or a history of trauma. The government has recognised the role Housing First can play in tackling rough sleeping, with £28 million invested in three city region Housing First pilots and a commitment to further rollout.

[How transport offers a route to better health](#)

66. This long read, published by The Health Foundation, examines the challenges of shifting towards a transport system that better supports health. It sets out how transport affects health, the difficulties in moving towards greater use of public transport and the effects of Covid-19 on travel patterns.

[Getting our homes in order: How England's homes are failing us](#)

67. The Centre for Ageing Better has recently published this report which highlights that people in their 50s and 60s are living in poor quality homes that are detrimental to their health and mental wellbeing. Common problems include excessive damp, an inability to heat homes properly and poor design and disrepair, which leave people at greater risk of falls and other injuries as they grow older.

[Using the planning system to promote healthy weight environments](#)

68. This document published by Public Health England looks at how local authorities' public health and planning teams can promote healthy weight environments. Set in the context of a whole systems approach to tackling obesity, this document provides a framework and starting point for local authorities to clearly set out in local planning guidance how best to achieve healthy weight environments, based on local evidence and needs.

[Changing the perfect picture: an inquiry into body image](#)

69. This enquiry from the Women and Equalities Committee sought to determine which groups were most at risk of developing poor body image, the factors driving its increased prevalence, and the impact of poor body image on the lives of those affected by it. It considers the impact body dissatisfaction can have on physical and mental health and its relationship with advertising in traditional and social media. It also considers the role the government should play through health, education or digital policy interventions to reduce the prevalence and impact of poor body image in the UK.

[Engaging men earlier: a guide to service design](#)

70. This handbook published by the Samaritans aims to provide a set of principles upon which wellbeing initiatives for men should be based. It is aimed at anyone commissioning, designing, evaluating, or delivering initiatives, services or activities aimed at improving the wellbeing of men.

[Still not safe: the public health response to youth violence](#)

71. This report published by the Children's Commissioner for England, assesses how effectively existing infrastructure within local authorities is being used to deliver a public health approach to preventing gang involvement and youth violence.

[Support for domestic abuse victims](#)

72. This briefing, published by the House of Commons library, outlines support for victims of domestic violence and abuse. It considers social services, housing, social security benefits, health services and preventative actions in education settings.

[The health of people from ethnic minority groups in England](#)

73. This long read published by the King's Fund, examines the differences in health outcomes for ethnic minority groups, highlighting the variation across groups and conditions, and considers what is needed to reduce inequalities.

[Inequalities in oral health in England](#)

74. This report published by Public Health England, describes the current picture of oral health inequalities and oral health services inequalities in England and ways to reduce them. It describes the current picture of oral health inequalities and oral health service inequalities in England by socioeconomic position, geographic area, protected characteristics and vulnerable (disadvantaged) groups. This is the first time that epidemiological data, NHS data and academic literature have been reported in this way.

[Global report on ageism](#)

75. This report published by the World Health Organisation outlines a framework for action to reduce ageism including specific recommendations for different actors (e.g. government, UN agencies, civil society organizations, private sector). It brings together the best available evidence on the nature and magnitude of ageism, its determinants, and its impact. It outlines what strategies work to prevent and counter ageism, identifies gaps and proposes future lines of research to improve our understanding of ageism.

[The best start for life: a vision for the 1,001 critical days](#)

76. This publication for the Department of Health and social Care sets out the findings of the Early Years' Development Review, which was asked to review the first 1,001 critical days from pregnancy through to the age of two. The review sets out a vision for best practice across the health system to ensure babies and children get the best possible start.

[The cost of smoking and the social care system](#)

77. A report published by Action on Smoking and Health (ASH) finds that on average smokers in England need care when they are 63, 10 years sooner than non-smokers. It estimates that £1.2 billion a year is spent on people who have care needs as a result of smoking. It calls for more comprehensive tobacco control strategies to ease the pressure on the social care system.

Papers to other local committees

78. [Promoting and Improving the Health of Children and Young People who are Looked After](#)
Children and Young People's Committee
15 March 2021
79. [Covid-19: Update Report](#)
Covid-19 Resilience, Recovery and Renewal Committee
16 March 2021
80. [Covid-19 Situational Update and Planned Refresh of the Local Outbreak Plan](#)
Covid-19 Resilience, Recovery and Renewal Committee
16 March 2021
81. [Youth Violence and Criminal Exploitation](#)
Policy Committee
17 March 2021
82. [Developing the Adult Social Care and Health Approach to Prevention and Early Intervention](#)
Adult Social Care and Public Health Committee
29 March 2021
83. [The UK Community Renewal and Levelling Up Funds](#)
Policy Committee
21 April 2021
84. [Nottinghamshire County Council approach to the Prevention of Modern Slavery](#)
Policy Committee
21 April 2021

Integrated Care Systems / Integrated Care Partnerships

85. [Board papers](#)
Nottingham & Nottinghamshire Integrated Care System
6 May 2021

Other Options Considered

86. None

Reasons for Recommendation

87. To identify potential opportunities to improve health and wellbeing in Nottinghamshire.

Statutory and Policy Implications

88. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public-sector equality duty, safeguarding of

children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

89. There are no financial implications arising from this report.

RECOMMENDATION

The Health and Wellbeing Board is asked-

- 1) To consider whether there are any actions required by the Health & Wellbeing Board in relation to the issues raised.

Councillor Dr John Doddy
Chairman of the Health & Wellbeing Board
Nottinghamshire County Council

For any enquiries about this report please contact:

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Constitutional Comments (CEH 17/05/21)

90. The report falls within the remit of the Health and Wellbeing Board under its terms of reference.

Financial Comments (DG 17/05/21)

91. There are no direct financial implications arising from this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

Electoral Division(s) and Member(s) Affected

- All