

Your community healthcare services. Your chance to get involved.

Consultation about our plans to become a Foundation Trust



Bridgewater
Healthcare at the heart
of your community

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Bridgewater Community Healthcare NHS Trust would like to acknowledge the support of patients and public in compiling this document.

Bridgewater Community Healthcare NHS Trust is one of the largest providers of NHS community healthcare services in the North West.

► Chairman and Chief Executive's introduction

We want our patients, their families and carers, our staff, our communities and partner organisations to have a greater say in the future development of the services we provide.

We believe the best way of achieving this is by becoming a Foundation Trust as this will give us greater freedom to respond to the needs of our patients and give them more say in how our services are run.

It is government policy for all NHS Trusts to become Foundation Trusts in the next few years. We plan to become a Foundation Trust by April 2013.

We have already done a great deal to help us on our way to achieving Foundation Trust status and now we need to get feedback on the arrangements which we are proposing to put in place.

We are carrying out a 12 week consultation on the proposals for the governance arrangements outlined in this consultation document.

These arrangements include building a membership base from among our patients, their families and carers, our staff and our local communities and establishing a Council of Governors to represent them. Find out more about what becoming a member means on page 11.

Please take the opportunity to read this document and learn about our plans. Please tell us what you think. Details of how to do this are included at the end of this booklet.

We would also like you to sign up as a member of our Trust to ensure that you can have your say on the future of local community healthcare services. A membership application form is included at the back of this booklet.



Harry Holden
Chairman



Kate Fallon
Chief Executive



Harry Holden
Chairman



Kate Fallon
Chief Executive

We provide NHS services to a population of 1,015,370 people living in Ashton, Leigh & Wigan, Halton & St Helens, Trafford and Warrington.

> About us

We also provide specialist community dental services in these areas plus Bolton, Stockport, Tameside & Glossop and Western Cheshire. We are called Bridgewater Community Healthcare NHS Trust because of the Bridgewater Canal and its network of links to the communities we serve.

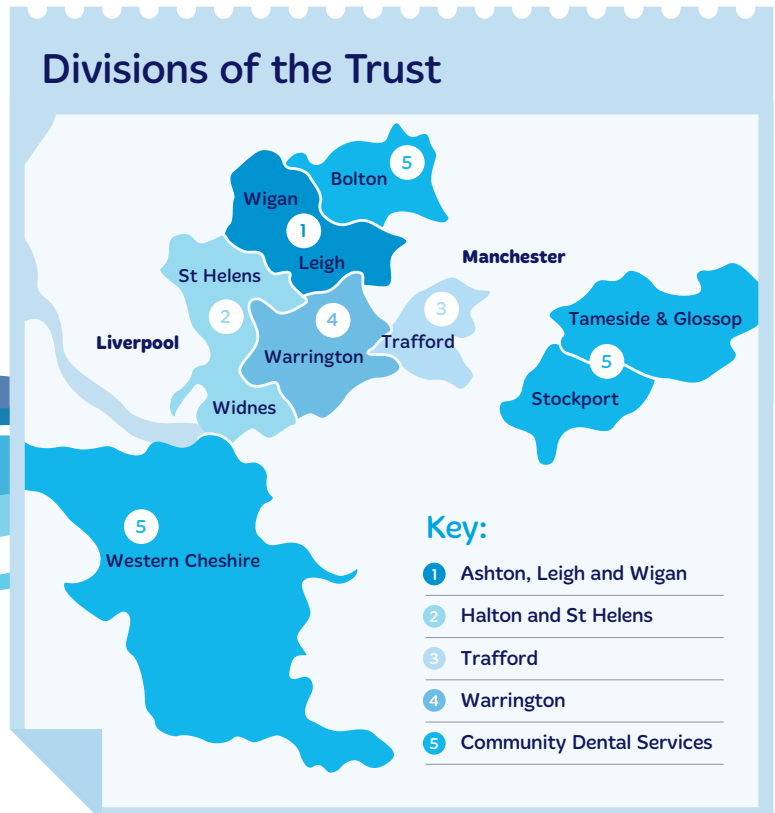
We employ 4,211 staff who support our mission to improve local health and wellbeing through providing care close to home, for example in clinics, health centres and patients' own homes. We also deliver healthcare services within locations at the heart of our local communities, such as schools, community centres and GP surgeries.

The delivery of services is organised into five divisions:

- Ashton Leigh and Wigan
- Halton and St Helens
- Trafford
- Warrington
- Community Dental
(Bolton, Stockport, Tameside & Glossop and Western Cheshire)

Community health services provide care, treatment and support for the youngest to the oldest members of our communities and everyone else in between. In many cases we have to support people's healthcare throughout their lives.

We are passionate about delivering care close to home and we believe that becoming a Foundation Trust (see page 8) will enable us to continue providing NHS services which are tailored to the current and future needs of the people and communities we serve.



› Our Services*

A summary of services is provided below:

Child Health	Health Visiting, School Nursing, Child Development Centres, Audiology, Complex Needs, Safeguarding, Child and Adolescent Mental Health Services, Children’s Community Therapy, Nursing and Continuing Care.
Health and Wellbeing	Health Improvement Services, including: Stop Smoking Services, Weight Management, Health Trainers, Sexual Health.
Urgent Care	Walk-in-Centres, District Nurses (including Out of Hours), GP Out of Hours, Intermediate Care, Home Based Intravenous Therapy.
Long Term Conditions	Specialist services including: Community Neuro Services, Continence Services, Community Matrons, Services for people with heart problems, diabetes, respiratory, and stroke.
Specialist Services	Dermatology, Orthopaedic and Musculo-Skeletal Services, Podiatry, Cancer and Palliative care, Wheelchair Services and Equipment, Mental Health, Community Physiotherapy, Occupational Therapy, Community Midwifery, Dietetics, Learning Disability Services, Homelessness Services, Falls Prevention.
Offender Health	Services provided to prisons and young offender institutions in Ashton, Leigh & Wigan and Warrington divisions.
Dental	Specialist Dental Services for vulnerable people including: people with physical and learning disabilities, looked after children and those with anxiety issues, Prison Dental Services and Oral Health Promotion.

* Please note that not all services are provided in every division of the Trust.

> Our vision for the future

> Mission

As an organisation working with and for local people we aim to address health inequalities and improve quality of life. This is reflected in our Mission statement:

To improve local health and promote wellbeing in the communities we serve.

> Vision

To achieve our Mission we will talk to, listen to and work with people to improve the delivery of healthcare and we will work with partners to deliver integrated services to improve health and wellbeing. This is reflected in our vision:

By working with local people and partners, we will promote good health and be a leading provider of excellent community healthcare services in the North West.

> Values

We have adopted a set of values which underpin the developing culture of our organisation and outline the attitudes, behaviours and culture of our workforce.



Patient Centred

Patient care is our priority.



Encourage Innovation

We encourage and embrace new ideas to deliver improvements in patient care.



Open and Honest

We communicate clearly to develop relationships based on mutual trust and respect.



Professional

We provide a quality service for patients by investing in our staff and recognise and value their contribution.



Locally led

We will continually develop our knowledge of the communities we serve, so that we can be responsive to local needs.



Efficient

We will use our resources wisely to ensure quality patient care and value for money.

› Strategic objectives

Our plans and ambitions for the future are under-pinned by our mission, vision and values. As a provider of community healthcare services, we are committed to excellence at every level.

We have listed below some of our key priorities which will help us deliver on our objectives over the coming years.

Strategic Intention	Strategic Objective
<p>Patients</p>	<p>We will demonstrate improvement in the delivery of high quality, safe, excellent and effective personal community healthcare for our patients.</p> <p>We will make it easier for patients/carers to access our services where and when they need them.</p> <p>Our Priorities are:</p> <ul style="list-style-type: none"> • Increase support for our vulnerable patients including children, people with disabilities, the homeless and elderly. • Improve services for those with long term health conditions including diabetes, cancer, respiratory and cardiac conditions and dementia. • Improve access and availability for community services and use new technologies that support care closer to home.
<p>Community</p>	<p>We will work with local communities to improve services that support their health and wellbeing, establishing targets that will demonstrate that we are achieving this.</p> <p>Our Priorities are:</p> <ul style="list-style-type: none"> • Develop services which help people to prevent ill health and those which help to avoid unnecessary admission to hospital. • Develop more integrated (joined up) services and packages of care together with key partner organisations.
<p>Organisation</p>	<p>We will be financially secure and accountable across our entire organisation.</p> <p>We will deliver value for money by ensuring efficiency in all our activity and processes to enable and drive innovation.</p> <p>We will achieve NHS Foundation Trust status by 2013 and be assessed as a leading provider of community healthcare in the North West by 2015.</p> <p>Our Priorities are:</p> <ul style="list-style-type: none"> • We will use the freedoms Foundation Trust status offers to improve and invest in services and patient care.
<p>People</p>	<p>We will develop world class skills, competencies and experience to deliver high quality care through our workforce planning and education and be seen as the employer of choice.</p> <p>We will engage with our staff, fostering talent and developing leaders, to deliver change, innovation and improvement.</p> <p>Our Priorities are:</p> <ul style="list-style-type: none"> • We will invest in our staff to deliver excellent care and support to the communities we serve.

Foundation Trusts are firmly part of the NHS and subject to its standards, performance ratings and systems of inspection. Their primary purpose is to provide NHS care to patients according to NHS quality standards and principles.

➤ What is a Foundation Trust?

NHS Foundation Trusts are different from existing NHS Trusts in the following ways:

- They are independent legal entities.
- They have unique governance arrangements and are accountable to local people, who can become members and governors. Each NHS Foundation Trust has a duty to consult and involve a board of governors (comprising patients, staff, members of the public and partner organisations) in the strategic planning of the organisation.
- They have greater freedom from central government control. As self-standing, self-governing organisations, NHS Foundation Trusts are free to determine their own future.
- They have new financial freedoms and can raise capital from both the public and private sectors within borrowing limits determined by projected cash flows and therefore based on affordability. They can retain financial surpluses to invest in the delivery of new NHS services.
- They are overseen by Monitor (Independent Regulator of Foundation Trusts).

Bridgewater is currently an NHS Trust and is seeking to become a Foundation Trust.

We will continue to deliver on the principles of providing care that is free at the point of delivery. Becoming a Foundation Trust will not directly result in any changes to the services that we provide.

Our commitment to working with local people will be achieved through developing a formal membership scheme and giving members the opportunity to vote for representatives on our Council of Governors. More details are provided over the next few pages.

As a Foundation Trust, we will also be required to change our name to Bridgewater Community Healthcare NHS Foundation Trust.



Becoming a Foundation Trust will ensure the continued delivery of locally led NHS healthcare in the heart of the communities we serve. This is of critical importance as we address the health needs of local people who are living longer.

➤ What are the benefits?

We must also provide accessible and cost effective care for people throughout their lives, including care for increasing numbers of people with complex conditions.

Some of the key benefits of becoming a Foundation Trust are:

- Our decision making will be local, as opposed to being dictated by central government, which will enable us to respond more quickly to the needs of both our patients and local communities.
- Local people and organisations will have a much greater role in the planning and design of our services and in setting our priorities by establishing a membership base and a Council of Governors.
- Both public and staff members will be able to elect the majority of representatives on our Council of Governors.
- The Council of Governors will represent members, local communities and other organisations and be able to influence key decisions about the Trust and our services and have a say on key appointments.
- We will be able to plan and manage our finances over a longer period of time and generate a surplus of money which will allow us to invest in new and improved services for patients.
- We will be required to meet all the standards set by the Independent Regulator of Foundation Trusts 'Monitor' as well as standards set by other authorities including the Care Quality Commission.

Our decision making will be local, as opposed to being dictated by central government

It is government policy for all NHS Trusts to become Foundation Trusts during the next few years. All NHS Trusts will become NHS Foundation Trusts or become part of an existing Foundation Trust. The following pages outline our proposals for the governance arrangements for the Foundation Trust.

➤ What are we consulting on?

We want people and organisations to provide feedback on our proposals to give local people and patients a greater influence over the development and delivery of their local community health services. We also want people to comment on our suggestions for membership and the Council of Governors.

➤ Having your say

Please read the following pages and complete the Tell us what you think form and return to the FREEPOST address in the envelope provided. No stamp is required. We have also included a membership form. You can also attend one of our public consultation events (please see page 21).



Becoming a Foundation Trust means, that we need to have a membership base that reflects the communities that we serve. Our membership will be made up of our patients, their carers and families, residents, members of our local communities and our staff.

➤ What is membership?

Some facts about being a member:

- Membership is free and will be open to anyone aged 14 or above. We are proposing this age as we provide a large number of services to both children and young people. We want all our members to be able to vote in our governor elections because we feel this is an age at which young people can make their own informed decision.
- All members can exercise a vote in elections for the Council of Governors.
- It is up to each individual member how much time they wish to devote to membership and members will be able to select from three levels of membership but can change this at any time.
- Members will have equal access to services as non-members.
- Members aged 16 years, or above can stand for election as a governor.
- Individuals can be members of more than one Foundation Trust.

Becoming a member of the Trust provides new ways for local people, patients, carers and staff to contribute effectively to the development of the Trust. Members will be able to positively influence the way in which the Trust is managed.

Join us as a member and you will be able to:

- Receive regular information, such as members' newsletters.
- Receive invitations to join in focus groups, surveys and give feedback on aspects of the Trust's services.
- Be kept informed of plans for future development and be asked for views on strategic service improvements, to give a public and staff perspective on future proposals.
- Have a say, through the Council of Governors, on decisions about proposed changes to services and future plans for the development of the Trust.
- Elect fellow members as representatives to serve on the Council of Governors.
- Stand for election to the Council of Governors, (if aged 16 or above).
- Register for the online NHS Discounts Scheme, which is exclusively for NHS Staff and Foundation Trust members.

Consultation questions:



Do you agree that the minimum age to become a member should be 14 years?

Do you agree that all members should be able to vote in governor elections from the age of 14?

(please see form at rear of document to give your view on these questions)

> Levels of membership

When you become a member, you will be asked to select one of the following levels of membership.

This is to ensure that members are able to choose the level of involvement with the Trust. If you change your mind, you will be able to change this preference at any time.

Level 1

Receive information about the Trust and issues affecting local health services at regular intervals, including invitations to events including the Annual Members' Meeting and Annual General Meeting, receive voting papers for the elections to the Council of Governors.

Level 2

Members will receive the same information as Level 1 members and receive invitations to participate in surveys and discussion groups, which will allow members to comment on service developments and the Trust's future strategic plans.

Level 3

Members will receive the same information as Level 1 and 2 members and will also receive more detailed information about governor vacancies, how to stand for election as a governor and receive invites to events for potential governors.

Consultation questions:



Do you agree with our proposed three levels of membership?

(please see form at rear of document to give your view on these questions)

> Becoming a member

Becoming a member is free of charge and easy to do. To become a public member, please complete the membership form at the back of this document.

You can also complete the online membership application form at www.bridgewater.nhs.uk/ft

Staff will automatically become members and do not need to complete the membership form.

You can also contact communications@bridgewater.nhs.uk or telephone **01942 482672** to learn more about membership.



➤ How will membership be structured?

We are proposing two membership constituency categories:



Public



Staff

➤ Public Constituencies

The Trust has taken a decision to have a single public constituency for patients, carers and members of the public, to reflect the fact that the majority of our patients will be resident in the boroughs we serve and therefore eligible for the public constituency. This also reflects the reality that a significant proportion of the population of the boroughs we serve will be service users, or will have accessed our services at some time.

The public constituency will be divided into the following six sub-constituencies which are based on local authority boundaries, Primary Care Trust (PCT) boundaries and the operational divisions within the Trust:

Ashton, Leigh and Wigan

(comprising the Borough of Wigan and mirroring the area covered by Ashton, Leigh and Wigan Division of the Trust).

Halton

(comprising the Borough of Halton and is part of the area covered by the Halton & St Helens Division of the Trust).

St Helens

(comprising the Borough of St Helens and is part of the area covered by the Halton & St Helens Division of the Trust).

Warrington

(comprising the Borough of Warrington and mirroring the Warrington Division of the Trust).

Trafford

(comprising the Borough of Trafford and mirroring the Trafford Division of the Trust).

Community Dental

(for people receiving specialist dental treatment in the boroughs of Bolton, Stockport and the PCT areas of Tameside & Glossop and Western Cheshire).

Rest of England

(comprises all other parts of England and will ensure that carers, or relatives of our patients can also have a say on our services).

Eligibility for public membership:

- Anyone aged 14 or over living in one of the areas defined as the public constituency.
- Staff members will not be eligible to join the public constituencies but will be eligible to join the staff constituency.

All public members will be entitled to vote to elect governors from their respective sub-constituencies to provide representation on the Council of Governors.

Consultation questions:

Do you agree with our plans for public membership constituencies?

(please see form at rear of document to give your view on these questions)



➤ Staff Constituency

Our staff are our most valuable resource and will remain part of the NHS when we are authorised as a Foundation Trust. The Trust is keen to ensure that as many staff as possible are involved in and have a say in our organisation's future and development.

Eligibility for staff membership will be open to any individual who is employed by the Trust under a contract of employment with the Trust provided they are:

- employed by the Trust under a contract of employment which has no fixed term or has a fixed term of at least 12 months; or
- been continuously employed by the Trust under a contract of employment for at least 12 months.

The Trust intends to operate a system of automatic membership for staff, the impact of which is that all staff eligible for membership will become members unless they advise that they do not wish to be included.

Staff members will be allocated to one of the sub-constituencies of the Staff Constituency. Any member of staff who leaves the Trust's employment can be transferred to the appropriate public constituency.

All staff members will be entitled to vote to elect governors from their respective sub-constituencies to represent them on the Council of Governors.

Staff sub-constituencies:

- Registered Nurses/Midwives
- Allied Health Professionals/other registered healthcare professionals
- Clinical support staff, including Assistant Practitioners/Healthcare Assistants
- Medical
- Dental
- Non-clinical support staff, including managerial and administrative staff.

Consultation questions:

Do you agree with our proposals for staff membership?

(please see form at rear of document to give your view on these questions)



The views of members will be represented at the highest level within the Trust through establishing a Council of Governors. Our Council of Governors will play an important role in influencing the direction and decisions taken by the Trust.

› Council of Governors

The Council will be made up of members of the public and staff constituencies as part of a democratic voting process. In addition to this, a number of governors will be appointed to represent the Trust's partner organisations.

The Council of Governors will not have responsibility for the day-to-day running of the Trust but will have the following important statutory responsibilities:

- To appoint and, if appropriate, remove the Chair and Non-Executive Directors.
 - To decide the remuneration, allowances and other terms and conditions of office of the Chair and Non-Executive Directors.
 - To approve the appointment, (by the Non-Executive Directors) of the Chief Executive.
 - To appoint and, if appropriate, remove the Trust's financial auditors.
 - To provide their views to the Board of Directors during the Trust's forward planning process.
- To receive the Annual Report and Accounts.
 - To hold the Board of Directors to account for the performance of the Trust.

In addition to this governors will also:

- Represent the interests of the local community and be consulted on proposed changes to how services are delivered.
- Provide an active link between the NHS Foundation Trust and communities.
- Review the Trust's Membership Strategy and support the recruitment of members.
- Be actively involved in forums and advisory groups.

Governors will be elected for a term of three years and will be eligible for re-election at the end of this period.

› Structure of Council of Governors

The Trust is proposing a Council of Governors made up of 34 governors. This includes 18 governors elected by members of our Public Constituency and nine governors elected by our Staff Constituency. The number of public governors must exceed the staff and partner governors combined. This allows us to invite nominations for seven governors from partner organisations.



Public – 18



Staff – 9



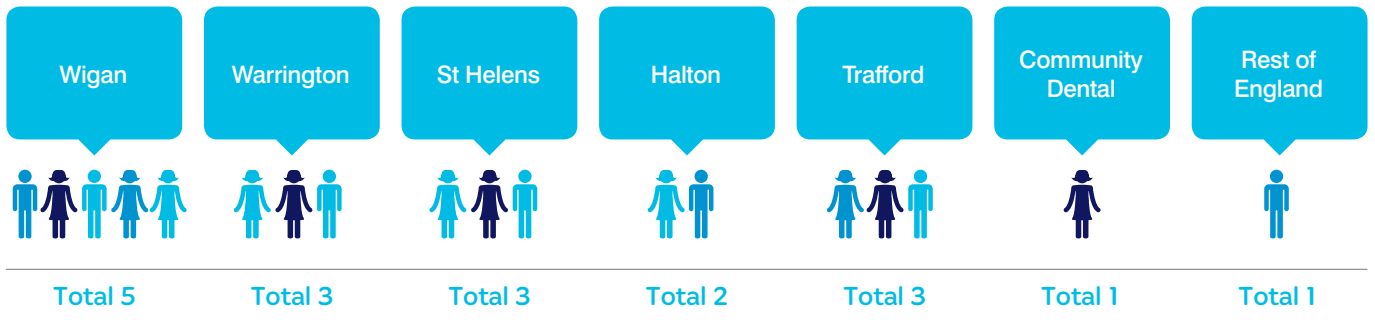
Appointed-Partner – 7

Total 34

Table of Council of Governors for membership constituencies:

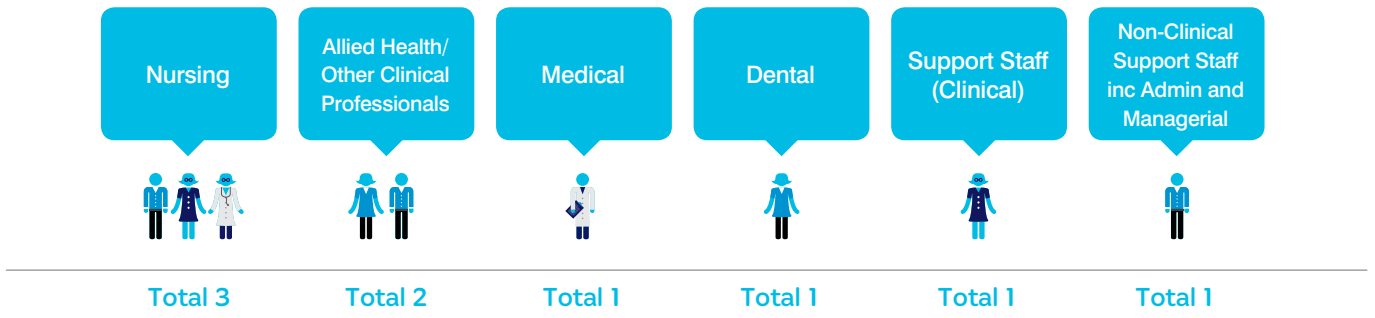
Public Governors (elected)

We propose the following allocation of public governors based on the population size and the level of service we provide in each of the sub-constituencies.



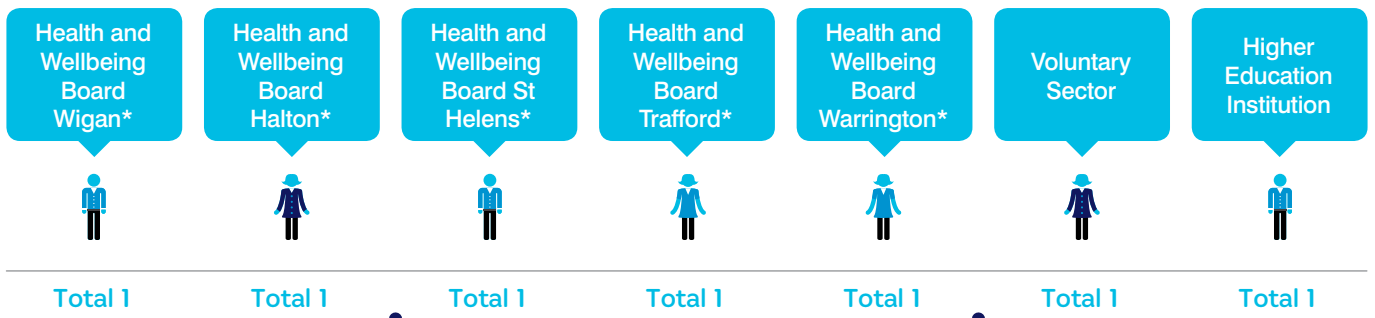
Staff Governors (elected)

We propose the following allocation of staff governors based on the numbers of staff in each of the sub-constituencies.



Partner-appointed Governors (appointed)

We have decided to seek nominations for appointments to the council of governors from a number of organisations and forums.



↓ ↓

Total
34 Governors

➤ Explanation of Health and Wellbeing Boards

Health and Wellbeing Boards will bring together locally elected councillors with the key commissioners, including representatives of clinical commissioning groups, directors of public health, children's services and adult social services, and a representative of local HealthWatch (the new patients' representative body) in each borough.

When agreeing nominations from the Health and Wellbeing Boards we must take into account the legal requirement to have at least one governor from a Local Authority and at least one Governor from an NHS Commissioning organisation on the Council.

The Council of Governors will be involved in key decisions about the future of the Trust

Consultation questions:

Do you agree with the proposed number of public governors?

Do you agree with the number of staff governors proposed?

Do you agree with the proposals for appointed partner governors?

(please see form at rear of document to give your view on these questions)



The Trust Board will be legally accountable for the safe and effective operation of the Trust's services and ensuring that we meet our statutory obligations.

➤ Board of Directors

The Board provides leadership and strategic direction to the organisation and is also responsible for ensuring that the Trust performs well and meets all targets.

The Board comprises 13 Directors of whom eight are Non-Executive Directors, including the Chairman, and five Executive Directors, including the Chief Executive.

As a Foundation Trust the Board will continue to undertake this role but will work closely with the Council of Governors, which will be chaired by the Chairman of the Trust.

Working in this way will ensure that the Council of Governors will be involved in key decisions about shaping the future of the Trust.

**The Board provides
leadership and
strategic direction to
the organisation**

Relationship between Members, Council of Governors and the Trust's Board of Directors

Members

Staff, Service Users & the Public. i.e The "stakeholders" of the organisation

Elect representatives to form the Council of Governors



Consult with and inform members

Council of Governors

Chaired by the Trust Chairman. The Council of Governors is made up of the representatives elected by members and nominated representatives of the Trust's Partnership organisations. The Council holds the Board of Directors to account for the Trust's performance and represents the interests of the members and other stakeholders.

Holds the Board of Directors to account for the performance of the Trust



Submit forward plans for approval

Board of Directors

Includes the Trust Chairman, Chief Executive, Executive Directors and Non-Executive Directors of the Trust. It has responsibility for management of the Trust and its services and sets the strategic direction for the Trust and holds the executive directors to account for the day-to-day running of the Trust.



What happens next?

> Have your say

Tell us what you think about our plans and sign up to become a member using the forms at the back of this booklet, or attend one of our public consultation events.

> Feedback on the consultation

When the consultation period has ended, we will review all feedback and take this into account when making our application to become a Foundation Trust, to the Secretary of State for Health.

We will publish a summary of feedback to the consultation on our website and details of how it has influenced our plans. If the Secretary of State supports our application it will then be assessed by Monitor (the Independent Regulator of Foundation Trusts), who will then decide if we can become an NHS Foundation Trust.

If you have any questions or comments about this consultation please email communications@bridgewater.nhs.uk or telephone 01942 482672.



Foundation Trust timetable key dates:

Consultation ends:

April 30 2012

Publish summary responses to consultation:

May 2012

Application to Secretary of State:

December 2012

Monitor Assessment commences:

January 2013

Public consultation events:

Halton & St Helens

8th Feb, 16:00 – 18:00

Crownway Community Centre
Crown Street, Newton le Willows,
WA12 9DA

Ashton, Leigh & Wigan

22nd Feb, 10:30 – 12:30

Kingsleigh Methodist Church
73 King Street, Leigh, WN7 4LJ
01942 606630

Ashton, Leigh & Wigan

22nd Feb, 18:00 – 20:00

Leigh Miners Welfare 4 Kirby Road,
Twist Lane, Leigh, WN7 4EF
01942 671782

Halton & St Helens

23rd Feb, 11:00 – 13:00

St Helens World of Glass,
Chalon Way East, St Helens WA10 1BX

Warrington

2nd March, 12:00 – 14:00

Village Hotel Centre Park,
Warrington WA1 1QA

Trafford

5th March, 10:00 – 12:00

The Horrocks Meetings Room
St Matthews Hall Chester Road,
Stretford Manchester, M32 8HF

Trafford

6th March, 18:00 – 20:00

Sale Masonic Hall, Tatton Road,
Sale M33 7EE

Warrington

6th March, 19:00 – 21:00

Firgrove Hotel Knutsford Old Road,
Warrington, WA4 2LD

Ashton, Leigh & Wigan

12th March, 11:00 – 13:00

Queens Hall Methodist Church
46 Market Street, Wigan, WN1 1HX
01942 244358

Ashton, Leigh & Wigan

12th March, 18:00 – 20:00

Wigan and Leigh College
Parsons Walk, Wigan
01942 763206

Halton & St Helens

13th March, 11:00 – 13:00

The Foundry Lugsdale Road
Widnes, WA8 6DA

Warrington

21st March, 13:00 – 15:00

Peace Centre Great Sankey
Peace Drive Great Sankey
Warrington, WA5 1HQ

Please visit www.bridgewater.nhs.uk/ft
for up-to-date information.

Contact information

You can give us your views in a number of ways:

Complete the feedback form return to the FREEPOST address in the envelope provided. Alternatively, you can write to us, email us, or contact us by telephone using the details below:

Contact address:

Bridgewater Community Healthcare NHS Trust
Bevan House
17 Beecham Court
Smithy Brook Road
Wigan
WN6 7JA

Email: communications@bridgewater.nhs.uk
Telephone: 01942 482 672

For more information please visit our website
www.bridgewater.nhs.uk/ft

Why not follow us on Twitter
www.twitter.com/Bridgewater_NHS

or like us on Facebook
www.facebook.com/BridgewaterNHS

If you would like this document in another language or in a format such as easy-read, Braille or audio please contact 01942 482672 or email us at communications@bridgewater.nhs.uk. Please contact us if you require any help interpreting this document.

若您希望將本文件翻譯成其它語言或格式，如：簡單圖文格式、盲文或轉換為音頻請致電 01942 482672；或發送電子郵件至 Communications@bridgewater.nhs.uk。若您需要對該份文件進行口譯，敬請聯繫我們。

إذا كنت ترغب في ان تكتب هذه الوثيقة بلغة أخرى او بتصميم (شكل) آخر مثل برنامج ايزي-ريد، او طريقة برييل للمكفوفين او صوتيا، الرجاء الاتصال بنا على رقم الهاتف 01942482672 او عن طريق البريد الالكتروني communications@bridgewater.nhs.uk. يرجى الاتصال إذا تحتاج الى مساعدة في ترجمة هذه الوثيقة.

اگر شما تمایل دارید این مطالب را به زبانی دیگر در قالبی دیگر مثل بریل و یا آسان خوانی و یا بصورت صوتی دریافت کنید لطفاً با ما با شماره 01942-482672 و یا از طریق پست الکترونیکی Communications@bridgewater.nhs.uk تماس حاصل فرمایید. لطفاً در صورت نیاز به کمک در ترجمه و تفسیر این مطالب با ما تماس حاصل فرمایید.

Если Вы хотели бы получить данный документ на другом языке или в ином формате, например, легком для чтения, в формате брайлевской печати или в аудиоформате, позвоните по телефону 01942 482672 или напишите по адресу электронной почты Communications@bridgewater.nhs.uk. Обращайтесь к нам, если Вам требуется помощь в переводе данного документа.

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