



Gateshead resilient communities

Reflections on the impact of
COVID-19

About Healthwatch Gateshead

Healthwatch Gateshead is an independent not-for-profit organisation and one of 152 Local Healthwatch organisations established in England under the Health and Social Care Act 2012. We help children, young people and adults to have a say about social care and health services in Gateshead. This includes every part of the community, including people who sometimes struggle to be heard. We work to make sure that those who plan and run social care and health services listen to the people using their services and use this information to make services better.

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Introduction

In spring 2021, as part of an annual priority setting process, the Healthwatch Gateshead Committee chose the theme of 'resilient communities' as an area to focus on during 2021–2022.

We wanted to understand how the COVID-19 pandemic had impacted on the health and wellbeing of the people of Gateshead. How different people and communities responded and what can be learned from those responses to help to support resilient, healthy, thriving communities in the future. We wanted to know what happened that really 'worked' for people and to understand why it worked. Between September and November 2021, we carried out 17 visits to a variety of community and public venues across two areas of Gateshead and spoke to 131 people.

We hope that those who design and deliver public and voluntary services find the insights outlined in this report informative. We also hope that they use that knowledge to sustain and develop the activities and initiatives that have helped people through the pandemic, enabling communities to become more resilient.

Methodology

We wanted to understand how people in Gateshead have experienced the pandemic to date. Despite ongoing COVID-19 restrictions, nervousness around interaction and survey fatigue, we decided that the best approach would be semi-structured, face-to-face discussions in which we asked people six open questions. The questions were designed to help us understand how the pandemic had impacted on people and what had helped them get through. The questions were supplemented with a series of prompts to use if people needed more help to answer fully.

The discussions were informal and were undertaken by a single, experienced interviewer. This approach gave us the time to explore issues in greater depth. We carried out the discussions in a variety of local settings where people felt comfortable and able to share their views and ideas.

During conversations between Healthwatch Gateshead and Gateshead Council's Neighbourhood Management Team, it was agreed that the work would focus on two areas of Gateshead: Dunston and Teams ward and Birtley ward. These wards are of a similar size and have very different populations. These were not chosen as comparator areas but rather to reach as wide a representation of Gateshead communities as possible within the time and resource constraints.

In 2015, the Index of Multiple Deprivation (IMD) showed that 37% of the population of Dunston and Teams fell within the 20% Most Deprived Areas in England. In Birtley, the figure was just 19% and, in Gateshead as a whole, it was 25%. The Dunston and Teams ward has higher unemployment levels, more children living in poverty and a lower life expectancy than both Birtley and Gateshead as a whole.

It also has a younger, more ethnically diverse population (source: Ward profiles, Gateshead Council website¹). The Dunston and Teams ward is urban and the Birtley ward is a small town with suburban areas and outlying villages. Choosing these two areas allowed us to engage with different populations.

The questions were:

1. How has your health and wellbeing been affected by the pandemic?
2. What has helped you get through the pandemic?
3. How did it help?
4. Who provided that help?
5. What can the designers and deliverers of public and voluntary services now do to sustain the positive changes?
6. What do you think we have learnt from the pandemic?

Between September and November 2021, we carried out 17 visits to a variety of community and public venues across Dunston, Teams and Birtley and spoke to 131 people. The combined population of the Dunston and Teams and Birtley wards is 17,319 (source: Office of National Statistics (ONS) 2011 Census, via the Gateshead Council website²), which means a response rate of just over 0.75% across the two wards. The ongoing restrictions related to the COVID-19 pandemic meant we continued to face limited opportunities for engaging with people in face-to-face settings and we are pleased with the number of people who took part in this work.

Just over 65% of survey respondents were women, meaning male views were under-represented in the results. This is not unusual for this kind of survey and is reflective of the venues and groups we were able to access. The age spread was as follows:

Age	% of respondents
17 and under	0.5
18 – 24	7
25 – 49	18
50 – 64	19
65 – 79	41.5
80+	14

This table shows older people were overrepresented and young people were underrepresented. Again, this is reflective of the venues and groups we were able to access, which were much more likely to be used by older people at the times we visited.

¹ www.gateshead.gov.uk/article/2868/Ward-profiles

² www.gateshead.gov.uk/article/3541/Census-2011-ward-factsheets

People from the LGBT+ community were also under-represented, with over 99% of respondents describing themselves as heterosexual, in 2018 the national figure was 93.7%³.

Just over 38% of respondents described themselves as having a disability and 15.5% described themselves as a carer. As only 11.1% of Gateshead's population describe themselves as a carer and 22% describe themselves as having a limiting long-term illness (source: Office of National Statistics (ONS) 2011 Census, via the Gateshead Council website), we achieved good representation of these two groups in our survey.

In terms of diversity, 3% of people described themselves as BME and 7.6% as Not White British, largely reflective of census data.

We actively sought out the views of other ethnic minority communities however, many groups and community spaces were still not functioning 'as normal' due to the ongoing effects of the pandemic. We found that many groups and centres were only just starting to open as we undertook our main engagement work during autumn 2021.

It is also important to note that all the people who completed our survey were out and about and had chosen to attend activities in their local community centre, library or village hall with others. The nature of the work meant we were unable to hear the views of people who were still self-isolating, shielding or who chose not to take part in group activities.

We, therefore, recognise that this report represents a snapshot moment in time and details the views, experiences, and reflections of the 131 people we spoke to. They offer some useful insights into how the people of Gateshead have experienced the COVID-19 pandemic and can be used in future planning and any further engagement work that is undertaken as we continue to live with COVID-19.

Survey findings

General findings

The responses to each of the survey questions are summarised below. Some people raised several points in response to a single question, while others chose not to answer some of the questions, therefore the number of responses does not total 131.

We have also included some quotes from participants to ensure their voice is central to the report. In the final section, we identify the main themes and points of interest arising from the responses.

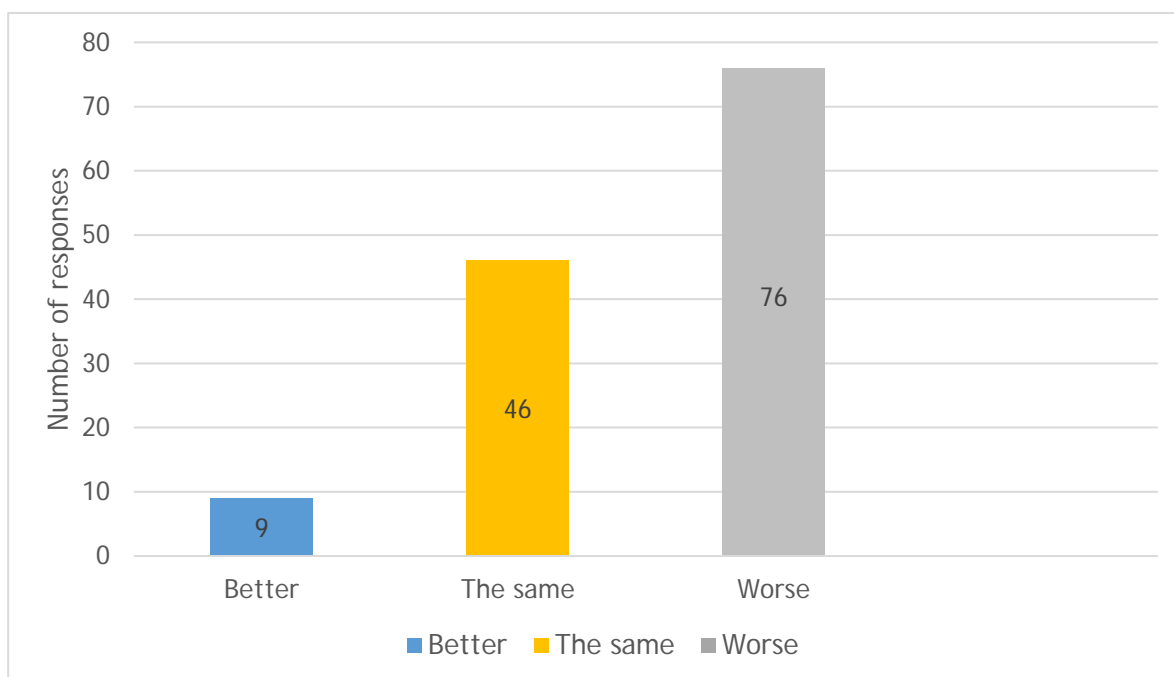
³ <https://tinyurl.com/ons-sexualidentityuk-2018>

Questions

1. How has your health and wellbeing been during the pandemic?

We have presented the answers to this question in two ways. The graph below shows people's overall response across both wards – was their health and wellbeing worse, the same or better during the pandemic? It clearly shows that most respondents (58%) stated that their health and wellbeing were worse, but a sizable proportion (35%) stated that their health and wellbeing stayed the same and, interestingly, a small number (7%) of people felt better.

People's overall response across both wards



We also looked at the responses in more detail, to identify the how and why behind the responses. The table below summarises points raised more than once. Not all the points raised were negative, so the table is split into positive and negative responses.

The table shows that lack of social contact and problems accessing health and care services were the issues that had the most negative impact, closely followed by lack of exercise, and being stuck indoors. For people who were able to get out, exercise (often walking, cycling, or gardening) had a positive impact.

Negative points raised more than once	Times mentioned
Lack of social contact, missing family/friends	17
Problems accessing health and care services	16
Lack of exercise and being stuck indoors	14
Deteriorating long term condition	11
Fear of getting COVID-19	8
Lack of support with a new baby	6
Concern about the impact on children	6
Problems home schooling (e.g. lack of space, resources, parental confidence)	5
Weight gain/overindulging	5
Financial worries	3
Inability to travel/go on holiday	3
Positive points raised more than once	Times mentioned
Health improved due to increased exercise	6
Enjoyed slower pace of life	3

What people told us:

“It was pretty hard. I lost my job, so I was at home with three children. I then had another baby five months ago. Whilst pregnant I didn’t get all my health checks and my baby checks have also been delayed. My two-year old’s social development has been affected and I struggled with home schooling.”

“My mother was ill just before the pandemic and the enforced inactivity impacted on her recovery to the point where I am now her carer. I feel the responsibility of this greatly, it fills me with extra anxiety.”

“I was very lonely... my wife is in a care home, so I was just stuck at home alone and fed up.”

“For the first six months I was actually enjoying having my own space and time to reset but once I realised it was an ongoing thing, I started to struggle. Not seeing people I love and missing out on socialising affected my anxiety a lot.”

2. What has helped you get through the pandemic?

This question was designed to ascertain what support people received that helped them get through the pandemic. We anticipated responses about family and friends, neighbourhood support and public sector support initiatives. The table below summarises what people told us. The responses were much wider, encompassing not only the support people received but also the other things that helped them get through.

Of particular interest was the positive impact that helping others had on people and how they developed personal resilience and coping strategies. People also placed importance on social media and other digital platforms for social contact, work, and leisure purposes.

Themes raised more than once	Times mentioned
Family	63
Friends	34
Access to the digital world	21
Exercise/walking/cycling/getting outdoors	19
Community centres and groups	19
Helping others	16
Neighbours	15
Professional help or support (health and care services)	13
Human contact	12
My hobbies	12
Contact from Gateshead Council/Age UK Gateshead	11
My own resilience	11
Working and my colleagues	7
The TV	7
My partner	7
Gardening	6
Furlough/Universal Credit uplift/foodbanks	6
My church	5
Alcohol	3
My pet	3
My local shops	2

What people told us:

“The centre got some funding and we all got lunches delivered to our homes. They phoned first with the menu, getting a call was lovely – it was something to look forward to.”

“Having the right frame of mind.”

“Family has been my biggest support. Having my dog was a great help. The local shops have been great, doing deliveries. All my neighbours have helped each other shopping, making meals, etc.”

“I was always in the garden. Also, I did a lot for my recently bereaved friend – that kept me going.”

“Working in a hospital (QE) there was always people around to support you. They set up a room you could go to if you were stressed, it helped to get away from the chaos and take some time out.”

“The Universal Credit uplift was a real help. I would have struggled without it.”

“The library was great. Dial a book saved my sanity.”

3. How did it help?

This question was designed to gain qualitative data that would help us understand specifically what it was about their activities, or the support they received, that helped people get through.

The table below shows points raised more than once and it is interesting that three themes appear to have emerged: the importance of social contact; keeping busy doing something positive; the importance of getting outside and exercising.

The quotes below help us understand why these issues were so important to people.

Points raised more than once	Times mentioned
Social contact stopped me from feeling isolated	30
Keeping busy, getting out of the house, doing something positive, helped	21
Getting outside/exercising made me feel better	13
Knowing there were people out there who cared	11
My activities stopped me from getting bored/gave structure to my days	10
Having people to talk to helped me	9
Helped me cope with the pandemic	9
Kept my spirits up	6
Helped me carry out day-to-day tasks	5
Helped me financially	5
Shared the load	3

What people told us:

“I didn’t have time to dwell on things and worry about them... helping with the foodbank made me feel useful.”

“I find my art very therapeutic; it gives me a purpose.”

“Talking to the neighbours over the fence, having a laugh, it really cheered me up.”

“Talking to others going through the same thing (alcohol misuse) helped.”

“Being outside lifted my mood.”

“Going to the Activity Centre, helped me make friends and made me more confident about going out.”

“Having a sense of structure to the day, helped me regain a sense of control.”

4. Who provided the support?

We included this question, despite overlap with question 2, as we wanted to specifically identify who provided the support that most helped people get through the pandemic.

Again, family and friends were mentioned the greatest number of times. Interestingly, the next most mentioned group was the local community centre or community group, closely followed by neighbours/local community. This would imply that people relied on very localised support during the pandemic. A significant number of people also stated that they relied mainly upon themselves.

Groups mentioned more than once	Times mentioned
Family	73
Friends	37
Community centre or community group	21
Neighbours/local community	20
Myself	20
Work colleagues/boss	7
Health professional	6
Gateshead Council/Age UK Gateshead	5
Partner	4
Support worker	3
Church	3
Government	3
Other local charities	2

What people told us:

“I found family and work colleagues very supportive. I also felt that communities were more supportive of each other.”

“Birtley Hub were great, they stepped in to help an elderly neighbour with dementia and provided him with quite a few food parcels.”

“The Big Local Cycling Group. Cycling really takes you away from your problems.”

“Family, friends and Dunston Help for Families charity.”

“In the early days of the pandemic Age UK’s food parcels helped enormously.”

“My Domestic Abuse worker and Tyneside Women’s Aid.”

“I just had myself.”

5. What can the designers and deliverers of public and voluntary services now do to sustain the positive changes?

The initial purpose of this question was to elicit ideas about what the designers and deliverers of services needed to do now, to sustain and develop the initiatives that had supported people during the pandemic.

Some people struggled to see any positive initiatives and the question was not answered by 25% of respondents. Other respondents raised many points and tended to answer the question by focusing on issues of particular importance to them. This means that some of the points raised reflect national health and social care issues that go beyond the pandemic but may have been exacerbated by it.

The table below shows that the issue raised most often involved access to primary care, in particular GP services, but also health visitors and midwives. Increased investment in community and outreach services was also important to many people.

People valued the weekly befriending calls and check-ins carried out by Age UK Gateshead and Mental Health Concern and which Healthwatch Gateshead volunteers supported. People felt these needed to be extended to other vulnerable groups.

There was also a significant number of respondents who felt that services need to be better prepared for future pandemics and more proactive in their response.

Themes raised by more than one person	Times mentioned
Ensure primary health services become more accessible	19
Increase investment in community and outreach services	18
Sustain and extend the regular checks on vulnerable people	16
Be better prepared locally and more proactive next time	16
Provide more accessible publicity about what help is available	9
Be cautious about opening up too soon and support people to comply with the rules	9
Increase investment in mental health services	8
Avoid future lockdowns, keep community services open	7
Invest in mobile services and support local businesses that provide home deliveries	5
Ensure that people can access services both in person and digitally and support people to do this	5
Provide activities for children to help them catch up and/or recover	4
Continue to provide financial support and food packs	4
Hold local events where people can get together, talk and share their views about the pandemic	4
Provide better public transport	3
Facilitate people to come together to help each other	3

What people told us:

“We need the Doctor’s surgery to get back to face to face appointments, at the moment it is horrendous.”

“Make sure people know what help is out there. Also encourage people to volunteer, it helps them and others!”

“During the pandemic my midwife moved into the Children’s Centre, which meant my partner could attend appointments, I really looked forward to those visits.”

“People living alone need to be identified and given support.”

“We need more local hubs where people can go to get support, for little things that you can get help with.”

“Shouldn’t be closing everything down. We need to get organised so that services are still accessible – safe but available.”

“We’re facing a potential mental health crisis... we need to understand how close to the edge people are at the best of times and plan how to deal with this.”

“Regular calls from my health visitor would have helped with my child’s social development, activities to promote speech, etc.”

6. What have we learnt from the pandemic?

We added this final question to get an overview of how people experienced the pandemic and to identify the key learning point for them. Some people answered on a personal level, some on a neighbourhood level and others on a societal level; 19% of respondents chose not to answer the question or said that they/we have learnt nothing.

The table below shows that the most common learning points were the importance of checking in with family, friends and neighbours and a concern that many people remained very fearful. People were usually not referring to themselves here but their family, friends, and neighbours, who were still reluctant to get out and about. People also spoke of groups with low membership, activities and events being undersubscribed and people not chatting on the street; in general, people thought this was a very negative impact of the pandemic.

Many of the other learning points can be seen as positive, however, it is interesting to note that five people stated that community spirit rose at the start of the pandemic but had now diminished and that things were now ‘back to normal’.

Themes raised by more than one person	Times mentioned
The importance of checking in with family, friends and neighbours	14
Some people are still very scared	14
To be kinder, more caring and more tolerant of others	13
That community spirit exists and is important	12
How to keep ourselves safe	11
That it’s important to make the effort to talk to people	8
Not to take things/people for granted	8
To be grateful and appreciate what you have	6
The importance of exercise and getting outdoors	5
Its highlighted mental health issues, isolation and loneliness	5
Learnt to value what is really important in life	5
We can all need help and there are people out there who care and will help	5
Community spirit rose during lockdown but has now diminished	5
There are still people who are still really struggling	5
We are more resilient than we thought	4
It has brought people together	4

What people told us:

“The things that matter are not material, for me they are relationships – family and friends.”

“We’ve realised the fragility of life, how easily things can change, and people can be taken.”

“We relied a lot on community, people pulled together, neighbours’ kindness, giving and receiving help. Community does exist.”

“I have learned that people are there for you when there is a crisis.”

“Life really can go on without many of the things we think are important.”

“Unfortunately, I think as things edge closer to normality, people are losing their care and support towards each other!”

“People have withdrawn into themselves.”

Key findings

Three main issues have arisen from this report and form the basis of our recommendations. Interestingly, these reflect three of the ‘5 Steps to Mental Wellbeing’⁴: to connect, to be active and to give. Several other points of interest have emerged and are also worth noting.

1. The importance of social contact

Our survey focused upon what helped people get through the pandemic and the results clearly show that social contact was immensely important to people. Family and friends provided the most support for people, but community centres and local charities were also seen as important. Those in receipt of public sector support, both ongoing and support via pandemic-specific initiatives, also valued social contact with others.

The positive impact of social contact was also apparent in people who supported others during the pandemic. Helping family, friends, and neighbours, volunteering with a local charity, or working in the care sector were often quoted as the main thing that helped people get through the pandemic.

Generally, feeling part of something and doing something positive appears to have been a huge protective factor for people. Conversely, the absence of social contact, for both themselves and others, was a major concern for respondents, especially where it was the perceived consequence of a continuing fear of catching COVID-19.

⁴ <https://tinyurl.com/five-steps-mental-wellbeing>

2. Access to services

Although our survey focused on what helped people get through the pandemic, respondents also wanted to tell us about what was important to them and these two were often not the same thing. The issue raised time and time again was access to primary health care services. We know that all primary health care services remained open during the pandemic but were delivered differently. However, many survey respondents considered primary health care services to be inaccessible, so there is an issue around how changes are shared with and promoted to residents.

The perceived inability to see a GP face-to-face was of particular concern, but people also mentioned the time it took to get through to their GP surgery. People with ongoing mental health needs and those who became unwell during the pandemic also raised concerns about difficulties in accessing mental health services. As these services are often accessed via a GP referral, the two issues are linked.

Some new parents felt the absence of face-to-face meetings with their midwives and health visitors. Given that social support networks were also significantly curtailed at this time, many felt isolated and alone as they faced the challenges of new parenthood. For this group, support via social media was of particular importance.

Finally, in this section, there is the issue of preparedness. People felt that services weren't prepared for this pandemic and that they need to be better prepared next time. What they meant by this varied. For some, it meant responding faster and more vigorously with a wider range of pandemic support initiatives. For others, it meant ensuring that community and health and care services remain open, with measures in place to ensure that they are accessible, well publicised and safe.

3. The positive impact of getting outdoors

After activities involving social contact, the next most important activity that helped people get through the pandemic was getting outdoors and exercising. Activities such as gardening, walking, cycling and dog walking were all seen as having a significant positive effect for those who could participate. These activities also presented an opportunity for social contact, and this was seen as a bonus.

People also talked about valuing the physical environment. Their garden or allotment, the local park, path and cycleway, country parks and street furniture were all appreciated and deemed worthy of further investment, as were local transport networks which were seen as a way of accessing the outdoors.

4. Other points of interest

- Older people tended to fare better. We weren't expecting this, and the point must be seen within the context of only talking to older people who were socially engaged.

However, it became apparent that the older people we spoke to fared better than their younger counterparts. Many said the pandemic had only a limited impact on their lives. When it did have an impact, their approach was one of 'getting on with it' and 'making the best of it'. They also appreciated the help they received and valued visits and phone calls from family, friends, and the wider community.

- Younger people had a more difficult time and appeared less resilient. Their everyday lives were impacted more, and they were more likely to have faced financial problems and social isolation.

We were unable to speak directly to many young people but, when we did, they told us how difficult they had found things. One described the pandemic as an 'absolute nightmare'.

Parents were also concerned about the negative impact of the pandemic on their children, particularly on their toddlers and teenagers. And many parents of school age children found home schooling challenging.

- Some people viewed the pandemic restrictions positively. Although numbers were small, some valued the slower pace of life and the quiet offered by the lockdown. People talked about having time to reflect and re-assess, plus time to carry out more practical tasks, such as getting their garden sorted, having a clear out, getting fit or pursuing a hobby.

Even those whose overall experience of the pandemic was less than positive told us how the pandemic provided an opportunity to re-evaluate their lives. People generally appear to have found the pandemic a time of learning and self-discovery.

Recommendations

The purpose of our survey was to understand how people in Gateshead experienced the pandemic and gain insight into what helped them get through it. As such, it does not lend itself to detailed recommendations. Instead, we have some suggestions about how those who design and deliver services might take on board some of the learning from this report. We have linked these to the emerging issues.

1. The importance of social contact

- If not already done or considered, extend 'checking in' calls to more people, for example, those with mental health issues and new parents. Extend the scope of those calls to include signposting and basic advice. Where possible, arrange for calls to be from known and trusted individuals.
- Develop more volunteering opportunities across all areas but particularly in community and health and social care venues, services, and projects. Ensure that Gateshead residents are aware of those opportunities, including those who may be digitally excluded. These opportunities are beneficial in many ways including connecting people within communities and improving the mental wellbeing of volunteers.
- Consider how multi-agency services can support all those who continue to avoid social contact and help them to re-engage with society.

2. Access to services

- Investigate how to increase and broaden access to local primary health care services and tier 1 mental health services. We appreciate that this is a huge challenge and a national issue. However, we cannot ignore how important it is to people and would draw attention to the example quoted on page 10, where a respondent was able to see her midwife at the local children's centre. Extending provision into community venues improves accessibility and may help reduce pressure on health centres.
- Develop more robust emergency planning measures so we are all better prepared for future pandemics or crises. To include:
 - Learn from collective experiences to enable the development of a wider range of support initiatives.
 - Use the learning from this pandemic, about how messages were delivered and received, to develop more effective information sharing methods for informing residents about new initiatives and/or changes to existing services.
 - Develop a standard information sharing process across both health and social care. This standard process should be joined up and cover the widest range of digital and non-digital methods of sharing information.
 - The implementation of measures to ensure public services remain open, accessible and safe.

- Provide more support for families who are home schooling, using the remote education provision framework, if not already used. We would suggest that it be become mandatory for Gateshead schools and further education providers to complete the government's remote education provision framework.
- Investigate how to increase resilience in younger people.

3. The positive impact of getting outdoors

- Further develop initiatives, such as social prescribing, community gardens, walking and cycling groups, that enable and support the widest range of people to get outdoors and take part in exercise.
- Continue to invest in local parks, the physical environment and in local infrastructure to ensure that all people can enjoy the outdoors safely and with confidence.

Conclusion

Our findings are in line with other research and give a Gateshead perspective, amplifying the experiences of local people. This may provide a useful foundation for further work as part of the wider system learning about what makes people in a community resilient. We hope that this can provide insight into what enables people to withstand and manage the wider effects resulting from the pandemic or other crisis. We hope that commissioners, funders, and providers of services can use this knowledge to sustain activities and initiatives that enable people and communities to be resilient and ultimately thrive. In addition to the recommendations outlined above, we also highlight the following:

1. The impact of the pandemic was not equal and some in our communities have been further disadvantaged as systemic issues have increased vulnerability. More work is needed in this space to tackle inequality and enable everyone to have a fair chance and to flourish.
2. That the importance of social contact is not simply recognised but where possible becomes part of business-as-usual activities across the Gateshead system.
3. The importance of kindness and giving to others is a protective factor in the wellbeing of individuals and this can support neighbourhoods and communities. For example, neighbours supporting one another with shopping, collecting prescriptions and sharing meals.
4. Work on access to local primary health care services and tier 1 mental health services continues as we emerge from the pandemic and that local people are engaged as equal partners in this work as their experiences are vital.

Acknowledgements

Healthwatch Gateshead would like to thank all those who took the time to complete our survey. We are also grateful to all the organisations and venues who welcomed us into their premises, including:

In Teams/Dunston

Teams Life Centre

Gateshead Big Local

Dunston Activity Centre

Teams and Bensham Community Care

Teams Medical Centre

In Birtley

Birtley Hub

Birtley Community Centre

Barley Mow Village Hal

Birtley Library

Kibblesworth Village Millennium Centre

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