

Directorate of Performance Assurance

FOUNDATION TRUST MEMBERSHIP STRATEGY



Together we speak 

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Author / Contact:	Alison Hurley, Membership Manager

Northern Lincolnshire and Goole NHS Foundation Trust actively seeks to promote equality of opportunity. The Trust seeks to ensure that no employee, service user, or member of the public is unlawfully discriminated against for any reason, including the "protected characteristics" as defined in the Equality Act 2010. These principles will be expected to be upheld by all who act on behalf of the Trust, with respect to all aspects of Equality.

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INTRODUCTION

NHS Foundation Trusts (FTs) were established to devolve decision making from central government to local organisations and communities, with a strong and clear line of local democratic accountability. They created in law a new governance structure designed specifically for Foundation Trusts, which ensures the direct participation of local communities, and provides and develops healthcare according to the core NHS principles of free care, based on need and not ability to pay.

The governance structure of all Foundation Trusts is comprised of the following components:

Members: members of staff and the general public from the local community can join the Foundation Trust as Members. Members vote to elect Governors and can stand for election themselves.

Council of Governors: represents the interests of Foundation Trust Members and partner organisations in the local community, holds the Board to account for the performance of the Trust and exercises statutory duties. The composition of the COG is set out in the Constitution.

The Board of Directors: made up of executive and Non-Executive Board members has collective responsibility for the performance of the Trust and exercises power on behalf of the Trust. As required by law, the chair of the Board of Directors also acts as the chair of the COG.

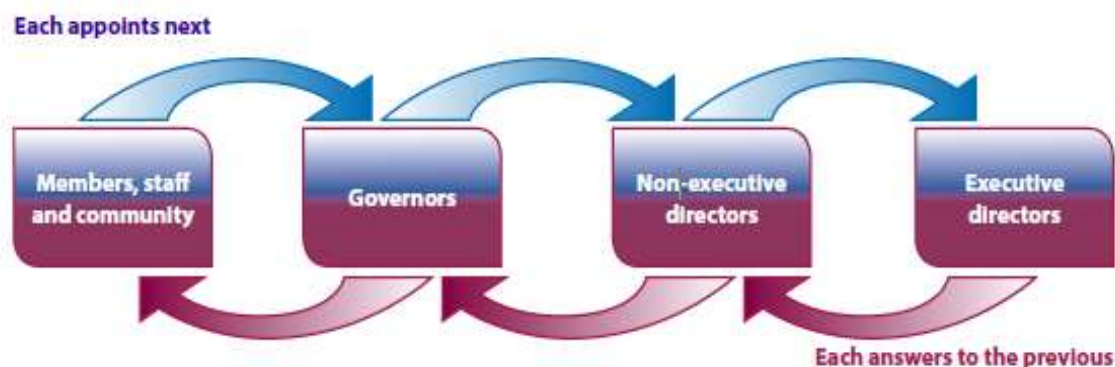
Those living in constituencies that are served by the FT can become members with the Membership Community being made up of public (including patients/carers) and staff members. From these members, Governors are elected (Council of Governors) to represent members' interests in the running of the organisation. Members are therefore given a bigger say in the management and provision of services with the FT. They are able to engage in establishing the direction of services provision and ensure that hospital services more accurately reflect the needs and expectations of local people (patient-led NHS service).

The diagram below demonstrates the relationship between the FT and its serving communities:



All FTs have a duty to engage with their local communities and encourage local people to become members of the organisation (ensuring that membership is representative of the communities that they serve). By this method, FTs provide greater accountability to patients, service users, local people and NHS staff with the overriding principle being that Trust members have a sense of ownership over the services that the FT provides.

As Governors are elected/appointed by Public and Staff Members they are accountable to those Members. In turn, the Non-Executive Directors are accountable to the Governors; this chain of interlocking relationships drives the performance of the organisation and is the mechanism of local accountability as demonstrated in the diagram below:



Governors face both directions; on the one hand they are the link between the local community, and its needs and views on the delivery of services, and the Directors making the decisions about services and the responsibility for delivery; on the other hand Governors need to transmit information from the Board of Directors to the local community about affordability and other constraints. The Governors, therefore, at all times link the community and the Trust, and the success of a Foundation Trust very much lies in the success of the Governors' role in linking the Trust to the community.

1.0 WHAT IS MEMBERSHIP?

Being a Member of an NHS Foundation Trust provides the general public and staff with the opportunity to get involved with their local hospital and participate and positively influence plans for the development of the Trust and its services for the benefit of patient and carers.

All NHS Foundation Trusts must legally have at least one public constituency (made up of people who live in the public constituency areas) and a staff constituency (made up of employees of the Trust). Membership to both the Public and Staff constituencies is free, and Members of each constituency will have the right to elect one or more Members to become a Governor serving on the Council of Governors, in line with the Trust Constitution.

1.1 PUBLIC CONSTITUENCIES

NLaG Trust has a membership community made up of Public and Staff Members aged 16 years and over who live in the area. The public constituencies are defined on the basis of one or more local government electoral areas and comprise of patients, carers and members of the public and aims to be representative of the communities of the Trust. In the table below are the Trust's public constituencies and the minimum number of members required, together with the number of Governor seats per constituency as per the Trust Constitution:

CONSTITUENCY	MINIMUM NUMBER OF MEMBERS	NUMBER OF GOVERNORS TO BE ELECTED
East & West Lindsey	200	2
Goole & Howdenshire	200	3
North East Lincolnshire	500	5
North Lincolnshire	500	5

Please see Appendix A for a list of wards in each public constituency, and see Appendix B for a map of these areas.

1.2 STAFF CONSTITUENCY

The staff constituency is made up from staff employed at the Trust who have been:

- ❖ permanently employed for a continuous period of at least twelve months or have a contract of employment with a fixed term of at least twelve months;
- ❖ Members who have carried out functions for the Trust but are not employed by the Trust, i.e. volunteers, academic staff, nurses and doctors who are employed by a recruitment agency who have carried out these functions at the Trust for at least twelve months.

1.3 BECOMING A MEMBER

Membership to the Public constituency is through application to the FT Membership Office (forms available to complete both on-line and hard copy), either by the following methods:



http://www.nlg.nhs.uk/membership/member_form.htm

(01724) 387946



nlg-tr.FoundationTrustOffice@nhs.uk

Membership to both the public and staff constituencies is FREE!

1.4 BENEFITS OF MEMBERSHIP

In line with the terms of the Trust Constitution, Members of the Trust will have the following rights and benefits to:

- ❖ Be able to elect Governors;
- ❖ Be able to stand as a Governor;
- ❖ Receive regular information about our activities, such as newsletters;
- ❖ Provide opinions and be kept informed of plans for future developments;
- ❖ Be involved and consulted on issues such as changes and improvements to services;
- ❖ Act as an ambassador for their community or interest group;
- ❖ Attend Member events;
- ❖ Recruit new Members;
- ❖ Utilise a dedicated area on the Trust website for members.

In addition the Trust's Governors will be able to:

- ❖ Assist with developing relationships with other organisations;
- ❖ Represent and promote the Trust and its services;
- ❖ Explore opportunities for joint working with other organisations.

2.0 DEFINING THE MEMBERSHIP COMMUNITY

Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) comprises three hospitals located at different sites as follows:

- Diana, Princess of Wales Hospital, Grimsby;
- Goole District Hospital;
- Scunthorpe General Hospital.

A total of 15 Public Governors are elected by Public Members during the annual Governor election process, with the four key public constituencies as follows:

- 2 for East and West Lindsey
- 3 for Goole and Howdenshire
- 5 for North East Lincolnshire
- 5 for North Lincolnshire

2.1 MEMBERSHIP COMMUNITY

The membership community is made up from the staff and public constituencies with the Trust defining its membership community as Public and Staff Members.

2.2 PUBLIC MEMBERS

The Trust has over 11,000 members, over 5,000 of which are Public Members. Eligibility for public membership of the public constituency includes:

- Anyone from the community aged 16 years or over;
- Anyone from the community who is interested in the Trust, including local residents, patients, carers and volunteers.

Public Members can become more involved in the work of the Trust with one way being through the Trust's Council of Governors with Public Members voting for Public Governors during the Governor Election process.

The table in Section 1.1 illustrates the minimum number of Public Members required and the corresponding number of Public Governors to be elected for each constituency.

2.3 STAFF MEMBERS

The Trust currently has over 6,000 Staff Members with staff being automatically invited to become Staff Members (subject to certain eligibility conditions outlined in section 1.2), however, staff are free to 'opt out' if they prefer. Staff are not eligible to be a Member if they have been dismissed as an NHS employee within the last two years or have been involved in a serious incident of violence against a member of staff or registered volunteer, at any of the Trust's facilities, within the last five years.

As with Public Members, Staff Members can also become more involved in the work of the Trust through its Council of Governors with Staff Members voting for Staff Governors during the election process.

There are currently 4 Staff Governors elected by the Staff Members.

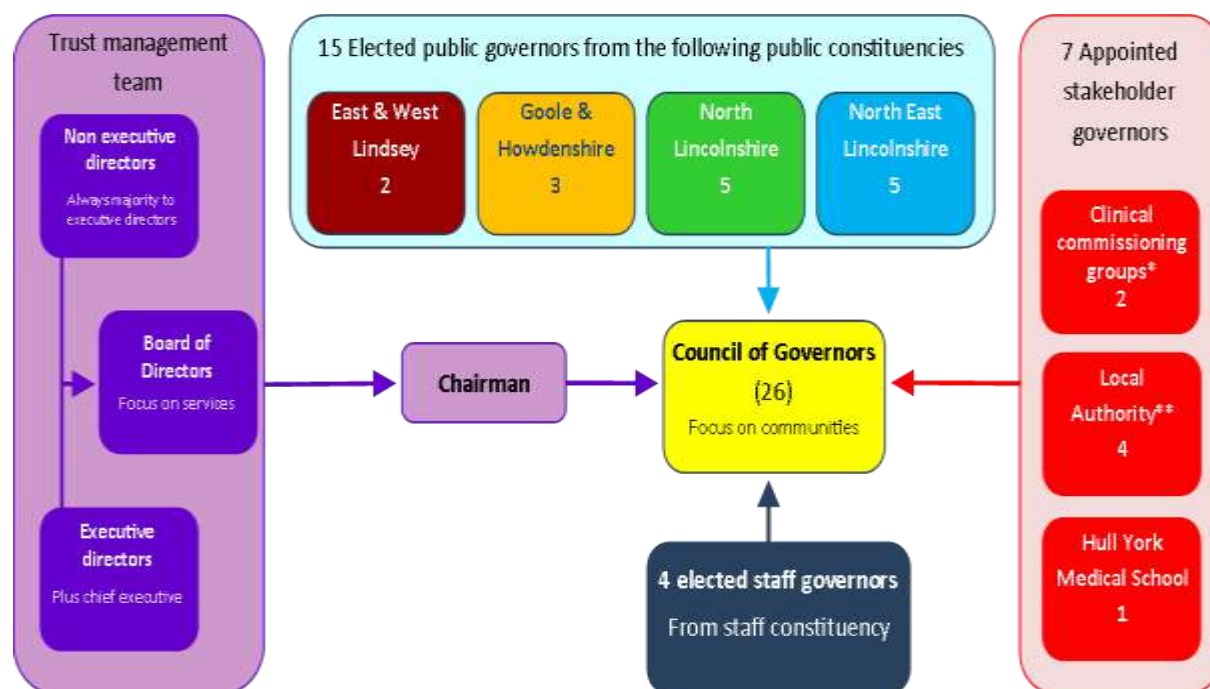
2.4 NOMINATED STAKEHOLDER GOVERNORS

In addition to the aforementioned Elected Governors, a total of 7 Nominated Stakeholder Governors are nominated from the following stakeholder organisations:

STAKEHOLDER ORGANISATION	NUMBER OF SEATS
Clinical Commissioning Groups: <ul style="list-style-type: none"> ○ North East Lincolnshire ○ North Lincolnshire 	2
Local Authorities seats: <ul style="list-style-type: none"> ○ East Riding of Yorkshire ○ Lincolnshire ○ North East Lincolnshire ○ North Lincolnshire 	4
Hull Yorks Medical School	1

3.0 COMPOSITION OF THE COUNCIL OF GOVERNORS

Our Council of Governors has both Elected and Nominated Governors. Public Governors are elected directly from and by our Public Members, Staff Governors are elected directly from and by our Staff Members and Nominated (Appointed) Governors are nominated from our partner organisations. The diagram below demonstrates the public and staff constituencies, and the Governor representation on the Council of Governors:



****Clinical Commissioning Groups** – North East and North Lincolnshire

*****Local Authorities (LA)** - East Riding of Yorkshire, Lincolnshire, North East and North Lincolnshire

In line with our Trust Constitution, more than half of the Council of Governors consists of Governors who are elected by members of the Trust (other than those who are members of the staff constituency).

4.0 BECOMING A MEMBER

Anyone aged 16 years or above can become a Member of the NHS Foundation Trust. All Members are eligible to stand for election. The Trust will actively encourage all eligible people to become members of the Trust and to develop as broad a membership as possible, thus, fully reflecting the diversity of the communities served and a representative membership.

4.1 THE CONSTITUENCIES

4.1.1 Public Members

Our local public, patients and carers form a single constituency and Public Membership is on an opt-in basis, through completing a brief Member Recruitment form.

4.1.2 Staff Constituency

Qualifying members of staff are automatically invited to become Members of the Trust (however they do have the option, to opt out). Staff who do not wish to become Members are not eligible to vote for Staff Governors. If a member of staff is eligible to

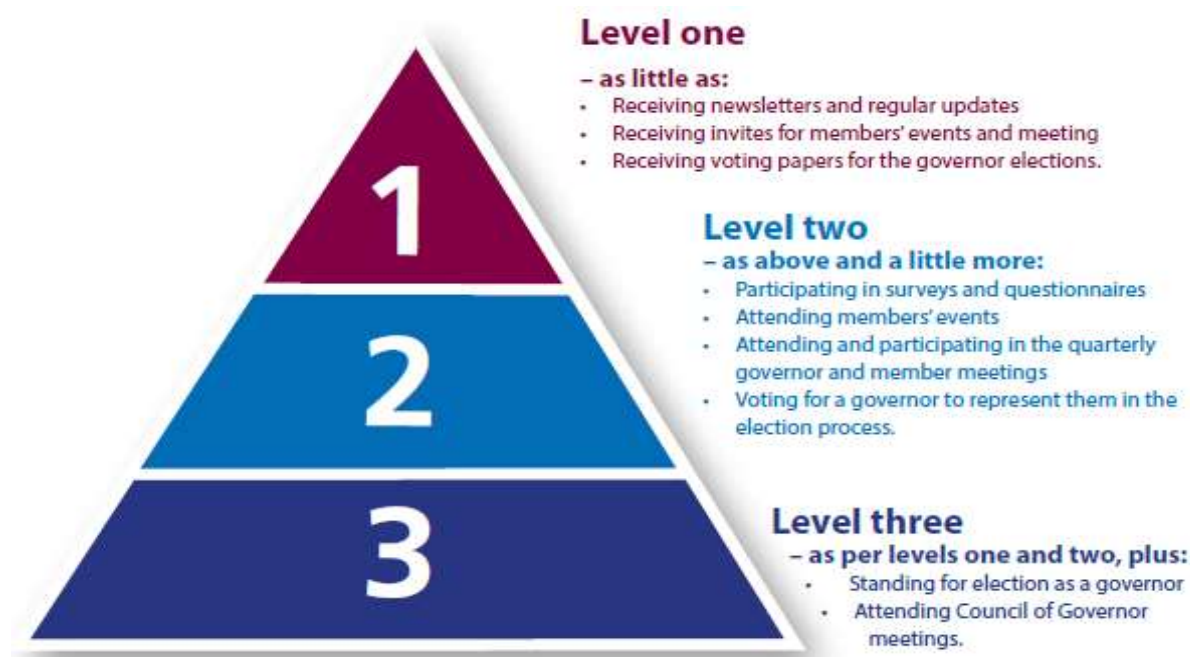
become a Staff Member they cannot become a Member of any other constituency, even if they opt out.

Foundation Trust status encourages staff to be even more involved in the running of the Trust and helps us to build on our current initiatives to attract and retain high calibre staff. Eligibility for membership of the staff constituency includes:

- ❖ The person must have been continuously employed by the Trust for a minimum of twelve months;
- ❖ If exercising functions for the Trust, the person must have done so for at least twelve months. Staff who hold temporary fixed term contracts must have a contract of at least twelve months.

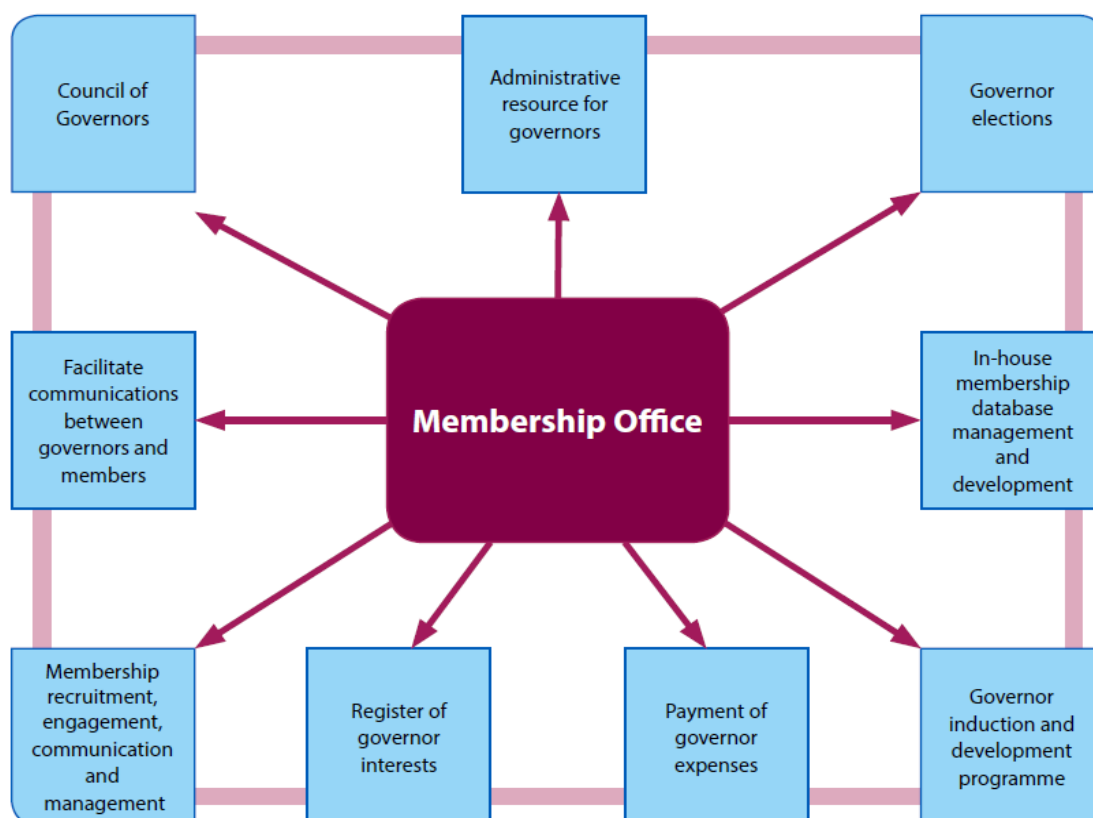
4.2 Levels of Engagement for Members

Some Members will choose to have a very active membership, whilst others will choose to only receive a newsletter. The level of engagement is up to the individual, and they can choose their level of engagement with the Trust, such as:



5.0 MANAGING ACTIVE MEMBERSHIP

The Trust has established a Membership Office Team sited in the Modular Building at Scunthorpe General Hospital, to develop the membership functions as per the examples in the diagram below:



With over 11,000 Members (over 5,000 Public Members (around 45%) and around 6,000 Staff Members (around 55%)), the Trust aims to maintain a minimum of 10,000 Public and Staff Members. In order to maintain an effective membership the following aim and key priorities has been set:

5.1 MEMBERSHIP AIM

For the Trust to have a representative membership which truly reflects the communities that it serves, with Governors actively representing the interests of members as a whole and the interests of the public.

5.2 KEY PRIORITIES

- **Membership Community** – to uphold our membership community by addressing natural attrition and membership profile short-fallings;
- **Membership Engagement** – to develop and implement best practice engagement methods;

- **Governor Development** – to support the developing and evolving role of our Governors by equipping our Governors with the skills and knowledge in order to fulfill their role.

5.3 MEMBERSHIP DATABASE MANAGEMENT

Our Membership Office staff ensure that our membership database is accurate, secure, reflects our constitution and is resilient enough to support our governance arrangements and elections.

This database administration includes:

- Ensuring our database is up to date by managing changes of details such as the prompt deletion of deceased members or changes of address are accurate and complete to reduce the risks of mailing to deceased persons etc;
- Preparation of appropriate data extracts for specific member groups as required by the Trust, for any activities being undertaken by the Trust such as consultation on key areas of interest identified, targeted communications etc;
- Utilising these data extracts to interrogate the membership data and establish the demographics of our members, ensuring that they are representative of our local population;
- Ensure that our elections are conducted in accordance with Monitor's Rules and Regulations by working with an approved elections service provider.

6.0 BUILDING A REPRESENTATIVE MEMBERSHIP

6.1 MEMBERSHIP

The awareness and benefits of Trust Membership are promoted using a variety of communication channels which include the Trust website, media releases, hosting and attending local events and staff and membership newsletters.

6.2 ROLE OF GOVERNORS

Trust Governors have an important role to play in relation to Member recruitment and engagement. Governors are the link between Members (establishing their views and needs in relation to the delivery of services), the general public and the Directors who make the decisions about services (holding responsibility for delivery).

Governors have a responsibility to convey information from the Board of Directors to Members and the general public about affordability, service plans and health improvement initiatives, and also to represent their public constituency at the Council of Governors (being the key link between the community and the Trust). This helps to ensure that our Trust responds to community needs, is rooted in its community and is owned by the community.

Having a broad and representative membership community and a Council of Governors elected from and by our members, is key to working together to better meet the needs of our communities. We believe that the Trust is afforded huge opportunities and benefits as a result of embracing new ways of operating and engaging with our Members.

The Council of Governors also play a role in key areas via advising on issues, assist in developing ideas, acting as a sounding board and as a critical friend and indeed with the continual review and revision of the Membership Strategy.

The Trust provides three quarterly Governor and Member Forums (one at each hospital site) for such purposes, and allows local Governors to update, consult and engage with their local Public Members.

In order to assist Governors with member recruitment, the Membership Office provide:

- **briefing notes** - on how best to approach member recruitment which also includes the benefits of members;
- **a presentation** - to be used when targeting specific groups or forums;
- **the Governor Handbook** - which provides a thorough overview of all key aspects of the Governor role, responsibilities, key documents, Trust services etc.

6.3 MEMBERSHIP WORKING GROUP

The Governors' Membership Working Group will be utilised to further develop and undertake planned membership engagement and recruitment, and review the promotional forms, posters, banners and items (such as pens, rulers, post-its etc.,) as and when required.

7.0 ENGAGING AND WITH COMMUNICATING MEMBERS

As a Trust we aim to ensure effective two-way communication and appropriate engagement with our Members via a combination of Trust and Governor managed formal and informal communications.

A 'Welcome Pack' is the first step for our new Members and assists with the initial communications, guidance and support.

7.1. MEMBERSHIP ENGAGEMENT AND COMMUNICATION

The Membership Office maintain regular contact with Members utilising a variety of methods, including:



- Trust website on internet with a designated section for Members;
- On-line membership recruitment form (on both of the above systems);
- Council of Governors webpages including the Governor Role information, meet the Governors section with photos and biographies;
- Details about Governor meetings and forums;
- Governor election page with details of the latest elections, how to stand as a Governor, the elections timetable, details of Prospective Governor Roadshows, results from recent elections;
- Specialised Trust Members' Portal which provides detailed information about all of the above and specifically Trust membership, the Council of Governors, elections, benefits of membership (including NHS discounts) and a new page for the latest information;
- Face to Face contact through quarterly Governor and Members Forums held at each of the three hospital sites;
- E-newsletter produced bi-monthly (Joint Staff and Members' newsletter e-mailed to all members with e-mail address and available in hard copy across the Trust);
- E-mails for the newsletter, upcoming Governor and Member Forum invites and details, links to local Healthwatch organisations and any current key information;
- Twitter and Facebook;
- Media releases for local media;
- Promotional posters across the Trust sites for the latest Forums, Council of Governor meetings, status of elections etc:



7.2 OPPORTUNITIES FOR MEMBERSHIP ENGAGEMENT AND INVOLVEMENT

There are various opportunities for members' to become more involved with the Trust, below are some examples:

- Attend Council of Governors Meetings
- Attending Quarterly Governor and Members' Forums held at each of the three hospital sites;
- Recruiting New Members;
- Voting in Governor elections;
- Standing for Election as a Governor;
- Fundraising Activities;
- Participating in Surveys;
- Participate in Consultation of Trust Plans;
- Find out more about the Work of the Trust;
- Join the Trust's Volunteer Services.

4.3 COUNCIL OF GOVERNORS

The Council of Governors will:

- Maintain and develop a programme of events;
- Review and develop membership materials and ensure the language is clear;
- Develop strategies to inform the wider public and stakeholders about the Trust;
- Evaluate the membership's response to different levels of information and methods of delivery;
- Use various communication methods to facilitate effective communication with Members;
- Regularly review the communication methods utilised to engage with members to ensure we continue to meet the needs of members.

8.0 PLAYING A KEY COMMUNITY ROLE

We continue to work closely with our partners in local authorities, Clinical Commissioning Groups (CCGs), children's services and other health and social care organisations to ensure that we play our part in the communities we serve.

Our partnership with Hull York Medical School is also beneficial to patients and the delivery of our healthcare services across the region, particularly the recruitment and retention of junior doctors.

The Board of Directors aim to:

- Seek out partnerships with like-minded organisations and key stakeholders in the community;
- Ensure the membership is fully aware of services provided by the Trust;

- Maximise opportunities for positive public relations in the local community.

The Council of Governors will continue to:

- Promote the aims and priorities of the NLaG Foundation Trust through links into the community;
- Develop the skills to enable them to represent and promote the organisation;
- Play an active role in recruiting additional members in the community served by the Trust and help to ensure that the membership is representative of the diversity within each constituency;
- Seek further opportunities for community engagement.

9.0 WORKING WITH OTHER MEMBERSHIP ORGANISATIONS

We aim to develop a strong sense of shared purpose with other likeminded organisations and we work with other NHS Foundation Trusts to raise the profile of community activity and to share best practice with such partners on membership, co-operation and community relations.

The Management Team (Board of Directors) and the Council of Governors will:

- Further develop existing relationships with other Foundation Trusts exploring whether joint projects are feasible and mutually beneficial;
- Engage our Governors to help us strengthen existing links with local organisations and to create new ones.

10.0 EVALUATING SUCCESS

The Trust supports the time, resources and infrastructure to enable the continued development of an effective Membership function, the management of stakeholder relationships and ongoing recruitment, induction and development activities for Members and Governors.

10.1 The areas for further development

- Membership services and support;
- Developing stakeholder relationships and involvement;
- Evaluating effectiveness and review.

The Trust Board of Directors will ensure the following are in place:

- A Foundation Trust Membership Office to provide a single dedicated point of contact for Members and potential Members;
- A comprehensive information pack for new Members about the Trust, and the role of a Foundation Trust Member, and how Governor elections are managed;
- The membership database is available for managing membership information.

The Council of Governors will:

- Review reports from the Membership Manager and respond or request information where necessary;
- Review and refine the Membership Strategy to ensure the document is kept up to date and relevant.

10.2 EVALUATION OF SUCCESS

Our success will be evaluated by the following:

- Polling Members;
- Completion of a handover of the Membership Strategy to the Governors;
- Governors having confidence to critique and amend the Strategy as per recommendations from Members and the Trust (Members will be asked for comments on the Strategy);
- Trust and Governors working to create a set of checks and balances to assess the success of membership as it grows and matures, through measures such as growth and satisfaction levels.

11.0 MEMBERSHIP RECRUITMENT TO DATE

The Foundation Trust has a duty to ensure that it engages with its local communities and encourages local people to become members of the organisation, ensuring that membership is representative of the communities that it serves. Therefore, it is important for the Trust to undertake Membership recruitment campaigns each year to address any membership profile imbalances (e.g. hard to reach groups, young members) and to compensate for natural attrition.

A Membership Report is submitted annually to Monitor (Independent Regulator of NHS Foundation Trusts) with the following categories specified:

Age: 0 – 16
17 – 21
22+
Not Stated

Ethnicity: White
Mixed
Asian or Asian British
Black or Black British
Other
Not Stated

Gender: Male
Female
Not Stated

Recorded Disability

Included in our Annual Report is also a section on the Membership and a Membership Profiling Report is included. Trust Annual Reports can be accessed on the website at <http://www.nlg.nhs.uk/about/trust/annual-reports/>.

The following are examples of some of the membership recruitment initiatives carried out:

- Poster campaigns;
- Senior managers meet with community/volunteer groups upon request;
- Encouraged staff to inform family/friends and people within their local communities about becoming a member;
- Membership posters and application forms forwarded to each Trust Division/reception areas;
- Production of newsletters for existing Members with details of how to become a member for family and friends;
- Targeted recruitment undertaken by the Trust to address membership profile imbalances and to actively address the specific target groups (eg. young people);
- “Become a Member” stand established and rotated around the various hospital entrances throughout the Trust;
- Promotional “Become a Member” materials established and made available at events.

In addition to the above we regularly update our Foundation Trust website and specialised Trust Members’ Portal.

To further engage our Staff Members we feature regular articles in our team brief. We are also providing regular updates to our Operational Managers Group and Trust Management Board with additional Departmental Updates.

12.0 PLANS FOR FUTURE MEMBERSHIP RECRUITMENT

We will continue to target key groups such as HealthWatch networks, patients, carers and community/ volunteer groups.

The Membership Manager will assist Governors with the formulation of action plans for targeted recruitment and engagement within their constituencies.

The Trust Management Team (Board of Directors) will ensure this is done by:

- Trust displays/stands in the main thoroughfares of the hospital, with easy contact details i.e. ‘call the Membership Office for an application form’;
- Running poster campaigns within the hospital and local community;
- Targeted contact with community, faith and volunteer groups.

The Council of Governors will:

- Find key recruiters for the hard to reach members of the population;
- Utilise the Trust web pages to circulate information and attract new Members;
- Review and develop action plans;
- Utilise the member and public engagement (the Governor briefing details including the Benefits of Membership document, PowerPoint presentation and Governor Handbook will assist with this).

12.1 MEMBERSHIP ENGAGEMENT

The Trust will endeavour to establish a more active membership with increased engagement, which will demonstrate local accountability.

The Trust will seek to ensure meaningful membership through involvement, collaboration and empowerment. In order to achieve this, the Trust will employ various plans which include:

- Engagement with new staff members as part of the staff induction process;
- Explore new and effective ways of effectively communicating with our members;
- Governors to promote membership across within their respective constituency;
- Benchmark with other FTs who have high levels of member engagement.

**The electronic master copy of this document is held by Document Control,
Directorate of Performance Assurance, NL&G NHS Foundation Trust.**

Appendix A

TRUST PUBLIC CONSTITUENCIES

The Trust covers a population of approximately 443,000 people and employs around 7,000 staff.

In the table below are the Trust's public constituencies and the minimum number of members required, together with the number of governor seats per constituency as per the Trust Constitution:

Name of the public constituency	Area of the public constituency by electoral wards	Minimum number of members	Number of governors to be elected
North Lincolnshire	The wards of: Ashby; Axholme Central; Axholme North; Axholme South; Barton; Bottesford; Brigg and Wolds; Broughton and Appleby; Brumby; Burringham and Gunness; Burton upon Stather and Winterton; Crosby and Park; Ferry; Frodingham; Kingsway/Lincoln Gardens; Ridge; Town.	500	5
North East Lincolnshire	The wards of: Croft Baker; East Marsh; Freshney; Haverstoe; Heneage; Humberston and New Waltham; Immingham; Park; Scartho; Sidney; South; Sussex; Waltham; West Marsh; Wolds; Yarborough.	500	5
Goole and Howdenshire	The wards of: Goole North; Goole South; Howden; Howdenshire; Snaith, Airmyn and Rawcliffe and Marshlands.	200	3
East Lindsey	The wards of: Binbrook; Grimoldby; Holton Le Clay; Legbourne; Louth North Holme; Louth Priory; Louth St Marys; Louth St Michaels; Louth Trinity; Ludford; Mablethorpe Central; Mablethorpe East; Mablethorpe North; Mablethorpe South; Marsh Chapel; North Somercotes; North Thoresby; Skidbrook with Saltfleet Haven; Sutton on Sea North; Sutton on Sea South; Tetney; Trusthorpe; Withern with Stain.	200	2
West Lindsey	The wards of: Caistor; Gainsborough East; Gainsborough North; Gainsborough South West; Hemswell; Kelsey; Scotter; Thonock; Waddingham and Spital; Wold View; Yarborough.		

Appendix B

MAP OF THE TRUST CONSTITUENCIES

