

Statement of purpose

Health and Social Care Act 2008

**The provider's name, legal status, address
and other contact details**

Including address for service of notices and other documents

Statement of purpose, Part 1

Health and Social Care Act 2008, Regulation 12, schedule 3

The provider's business contact details, including address for service of notices and other documents, in accordance with Sections 93 and 94 of the Health and Social Care Act 2008

1. Provider's name and legal status

Full name ¹	Sevenside Medical Practice					
CQC provider ID	1-594429323					
Legal status ¹	Individual	<input type="checkbox"/>	Partnership	<input checked="" type="checkbox"/>	Organisation	<input type="checkbox"/>

2. Provider's address, including for service of notices and other documents

Business address ²	Quayside House, Quay Street
Town/city	Gloucester
County	Gloucestershire
Post code	GL1 2TZ
Business telephone	01452 891110
Electronic mail (email) ³	Beverley.lewis4@nhs.net

By submitting this statement of purpose you are confirming your willingness for CQC to use the **email address** supplied at Section 2 above for service of documents and for sending all other correspondence to you. Email ensures fast and efficient delivery of important information. If you do not want to receive documents by email please check or tick the box below. We will not share this email address with anyone else.

I/we do NOT wish to receive notices and other documents from CQC by email	<input type="checkbox"/>
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- ¹ Where the provider is a partnership please fill in the partnership's name at 'Full name' in Section 1 above. Where the partnership does not have a name, please fill in the names of all the partners at Section 3 below
- ² Where you do not agree to service of notices and other documents by email they will be sent by post to the business address shown in Section 2. This includes draft and final inspection reports. This postal business address will be included on the CQC website.
- ³ Where you agree to service of notices and other documents by email your copies will be sent to the email address shown in Section 2. This includes draft and final inspection reports.

Please note: CQC can deem notices sent to the email or postal address for service you supply in your statement of purpose as having been served as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents.

3. The full names of all the partners in a partnership	
Names:	<ol style="list-style-type: none">1. Dr Emma Louise Bilton – emma.bilton@nhs.net2. Dr Simon Michael Loader – simon.loader@nhs.net3. Dr Sharon Kane – Sharon.kane2@nhs.net4. Mrs Beverley Lewis – Beverley.Lewis4@nhs.net

Part 2

Aims and objectives

Aims and objectives

What are your aims and objectives in providing the regulated activities and locations shown in part 3 of this statement of purpose

1. To provide the best quality care and service to our patients within a confidential and safe environment.
2. To show respect and courtesy to our patients at all times irrespective of their ethnicity, origin, religion, personal attributes or their individual health problem
3. To involve our patients in decisions about their health and treatment.
4. To promote good health to our patients through health education and good clinical care, both within the practice and the patient's own home.
5. To involve other health professionals in the care of our patients where it is necessary and in their best interest.
6. To ensure members of our team have an adequate skill mix and they receive appropriate training to ensure they carry out their duties well. To support our staff and protect them against abuse.
7. Encourage our patients to give feedback about the practice through an annual survey. Provide information to enable our patients to make a comment or complaint about the practice or an individual member of the team. Encourage our patients to join our Patient Participation Group.

Part 3

Location(s), and

- the people who use the service there
- their service type(s)
- their regulated activity(ies)

Fill in a separate part 3 for each location

The information below is for location no.:	1	of a total of:	1	locations
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Name of location	Sevenside Medical Practice
Address	Quayside House, Quay Street, Gloucester, Gloucestershire
Postcode	GL1 2TZ
Telephone	01452 891110
Email	Sevenside.mp@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>The building is 3 storey, the Practice is located on the first floor with patient and staff parking on the ground floor.</p> <p>The Practice leases the property from Gloucestershire County Council who occupies part of the building. The building also has another GP practice and a pharmacy who are both completely independent from our practice.</p> <p>The practice is located in the city centre and has good access to bus routes.</p> <p>There are 2 patient lifts in the building and one stretcher lift all of which can still be used in the event of a fire by the emergency services. There is an automatic door which allows easy access for wheelchairs.</p> <p>There are 15 clinical rooms including 4 treatment rooms. There is also a shared minor ops suite with adequate ventilation for safe procedures and sample collection. There are 2 staff toilets and male and female toilets for the patients which are both accessible by patients in wheelchairs. There are also admin offices in the practice premises. The clinical rooms have been designed with patient and staff safety in mind.</p> <p>All of the fixtures and fittings are new as is the majority of the equipment and all adheres to infection control and health and safety guidance.</p> <p>The staff team includes a mix of partner GPs, salaried GPs, advanced practitioner, prescribing and non-prescribing nurses, HCA, phlebotomist, pharmacists, mental health nurse and social prescribers.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/> Children aged 13-18
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Dr Emma Bilton		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Dr Emma Bilton		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Dr Emma Bilton		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Dr Emma Bilton		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Dr Emma Bilton		

Part 4

Registered manager details

Including address for service of notices and other documents

Please first read the guidance document *Statement of purpose: Guidance for providers*

The information below is for manager number:	1	of a total of:	1	Managers working for the provider shown in part 1
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1. Manager's full name	Dr Emma Louise Bilton
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2. Manager's contact details	
Business address	Sevenside Medical Practice, Quayside House, Quay Street
Town/city	Gloucester
County	Gloucestershire
Post code	GL1 2TZ
Business telephone	01452 891110
Manager's email address¹	
Emma.bilton@nhs.net	

¹ Where the manager has agreed to service of notices and other documents by email they will be sent to this email address. This includes draft and final inspection reports on all locations where they manage regulated activities.

Where the manager does not agree to service of notices and other documents by email they will be sent by post to the provider postal business address shown in Part 1 of the statement of purpose. This includes draft and final inspection reports on all locations.

Please note: CQC can deem notices sent to manager(s) at the relevant email or postal address for service in this statement of purpose as having been served, as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents to registered managers.

3. Locations managed by the registered manager at 1 above	
(Please see part 3 of this statement of purpose for full details of the location(s))	
Name(s) of location(s) (list)	Percentage of time spent at this location
Sevenside Medical Practice, Quayside House, Quay Street, Gloucester, GL1 2TZ	100

4. Regulated activity(ies) managed by this manager		
Personal care	<input type="checkbox"/>	
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Surgical procedures	<input checked="" type="checkbox"/>	
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Maternity and midwifery services	<input checked="" type="checkbox"/>	
Termination of pregnancies	<input type="checkbox"/>	
Services in slimming clinics	<input type="checkbox"/>	
Nursing care	<input type="checkbox"/>	
Family planning service	<input checked="" type="checkbox"/>	

5. Locations, regulated activities and job shares
<p>Where this manager does not manage all of the regulated activities ticked / checked at 4 above at all of the locations listed at 3 above, please describe which regulated activities they manage at which locations below.</p> <p>Please also describe below any job share arrangements that include or affect this manager.</p>
N/A

Inner City PCN CQC Statement of Purpose
ENHANCED ACCESS
GOVERNANCE

CQC STATEMENT OF PURPOSE

The Inner City PCN consists of 4 Practices:

Partners in Health
Sevenside Medical Practice
Gloucester Health Access Centre
Kingsholm Surgery

The Practices are working together to deliver care outside contract hours at the Enhanced Access Hubs operating within the PCN.

The Improved Access Hubs are sited at Gloucester Health Access Centre or one of the four practices on a rotational basis.

The Enhanced Access Hubs will be operating within a patient-led option whereby the responsibility for the regulated activities remains with the registered Practice.

All patients within the PCN registered at one of the practices will have access to medical care at the Enhanced Access Hubs.

The Hubs have access to the full medical records of the Locality's patients adhering to strict IT Governance and confidentiality rules and a signed Data Sharing Agreement.

CONFIDENTIALITY

Practices should adhere to their own Practice Confidentiality Policy and Agreement. All aspects of this agreement also apply to patients registered with other Practices who may attend the surgery, and whilst working at other practices in the area.