

Statement of purpose

Health and Social Care Act 2008

Brookfield Surgery

OUR MISSION

We aim to provide a holistic approach to the care of our patients; we encourage prevention of disease, provide appropriate care when our patients are ill, give advice and support in times of difficulty and refer to the best available specialist care.

The doctors and staff work well as a team and we feel that the Practice is friendly and welcoming and that we are all approachable.

To provide a place of work with a supportive team and a healthy work / life balance.

MARCH 2013

Please read the guidance document *Statement of purpose: Guidance for providers* and also the notes at end of this template before completing it.

Statement of purpose			
Health and Social Care Act 2008			
Version	1.01	Date of next review	MARCH 2014

Service provider	
<i>Full name, business address, telephone number and email address of the registered provider:</i>	
Name	Dr Allen & PARTNERS
Address line 1	Brookfield Surgery
Address line 2	Whitbarrow Road
Town/city	Lymm
County	CHESHIRE
Post code	WA13 9DB
Email	peter.finigan@premierdoctors.co.uk
Main telephone	01925 756969
ID numbers	
<i>Where this is an updated version of the statement of purpose, please provide the service provider and registered manager ID numbers:</i>	
Service provider ID	
Registered manager ID	

Aims and objectives
<i>What do you wish to achieve by providing regulated activities? How will your service help the people who use your services? Please use the numbered bullet points:</i>
1. To provide high quality primary care treatment to our patient population to include consultations, examinations, treatment of medical conditions

2. To focus on prevention of disease by promoting healthy living
3. To understand and meet the needs of our patients, involve them in decision making about their treatment and care and encourage them to participate fully.
4. To involve other professionals in the care of our patients where it is the patients best interests, i.e. referrals for specialist care and advice.
5. To ensure that all members of the team have the right skills and training to carry out their duties competently.
6. To create an educational environment, where staff promote and share learning amongst themselves, doctors in training and medical students
7. To review annually patient satisfaction surveys of the people who use our service and use the results to make change when required.

Legal status	
<i>Tick the relevant box and provide the information requested for the type of provider you are:</i>	
Use <input checked="" type="checkbox"/>	
Individual	<input type="checkbox"/>
Partnership	<input checked="" type="checkbox"/>
List the names of all partners	Dr Irvin Allen Dr Tony Johnstone Dr Peter Finigan Dr Aparna Rao Dr Catherine Doyle
Limited liability partnership registered as an organisation	<input type="checkbox"/>
Incorporated organisation	<input type="checkbox"/>
Company number	
Are you a charity?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Charity number:

Group structure (if applicable)	
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Please repeat the following table for each of your regulated activities¹

Regulated activity 1 <i>As shown on your certificate of registration</i>	Diagnosis and screening procedures Family planning Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury
Services <i>What services, care and/or treatment do you provide for this regulated activity? (For example GP, dentist, acute hospital, care home with nursing, sheltered housing)</i>	General Practice
Locations <i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i>	
Location 1:	
Name of location	Brookfield Surgery
Address line 1	Whitbarrow Road
Address line 2	Lymm
Address line 3	WARRINGTON
Address line 4	WA13 9DB

<p>Brief description of location²</p>	<p>Brookfield Surgery was built in the 1980s. All GP consulting rooms are on the ground floor to ensure ease of access; there are also toilet facilities for the disabled.</p> <p>We have an annexe to the surgery which is across the practice car park with 3 consulting rooms. This was renovated in 2009 and updated to include a disabled toilet and baby changing facilities.</p> <p>Patients are called in either by the GP themselves or the receptionist by their name.</p>
<p>No of approved places/beds (not NHS)³</p>	<p>n/a</p>
<p>Name and contact details of registered manager(s) (if applicable)⁴</p> <p><i>Full name, business address, telephone number and email address of each registered manager.</i></p> <p><i>For each registered manager, state which regulated activities and locations(s) they manage.</i></p> <p><i>Copy and paste the sub-section if they are more than two registered managers</i></p>	<p>Registered manager 1</p> <p>Full name: Dr Peter Finigan</p> <p>Proportion of working time spent at each location</p> <p>Contact details:</p> <p>Business address: Dr Allen and Partners Brookfield Surgery Whitbarrow Road Lymm WA13 9DB</p> <p>Telephone: 01925 756969</p> <p>Email: peter.finigan@premierdoctors.co.uk</p>

	Locations: see above	
	Regulated activities: see above	
	1.	
	2.	
	3.	
	4.	
	Registered manager 2:	
	Full name	
	Proportion of time spent at each location:	
	Contact details:	
	Business address:	
	Telephone:	
	Email:	
	Locations: see above	
	Regulated activities: see above	
	1.	
	2.	
3.		
4.		
Service user band(s) at this location⁵ <i>Use</i> <input checked="" type="checkbox"/>	Learning disabilities or autistic spectrum disorder	<input checked="" type="checkbox"/>
	Older people	<input checked="" type="checkbox"/>

	Younger adults	<input checked="" type="checkbox"/>
	Children 0-3 years	<input checked="" type="checkbox"/>
	Children 4-12 years	<input checked="" type="checkbox"/>
	Children 13-18 years	<input checked="" type="checkbox"/>
	Mental health	<input checked="" type="checkbox"/>
	Physical disability	<input checked="" type="checkbox"/>
	Sensory impairment	<input checked="" type="checkbox"/>
	Dementia	<input checked="" type="checkbox"/>
	People detained under the Mental Health Act	
	People who misuse drugs and alcohol	
	People with an eating disorder	
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	

Treatment & services provided by the practice on a daily basis

- General medical services
- Medication reviews
- Repeat prescription service
- Chronic disease management
- Cervical screening
- Post natal checks
- Phlebotomy
- Ante natal check (Wednesdays)
- Family planning services
- Immunisations e.g. childhood imms & travel imms

Diabetes clinic
Minor surgery (every 2 weeks)
Annual health checks
ECG's

Notes:

1. Regulated activity – If you use a combined statement of purpose, repeat the information for each of the regulated activities for which you are registered. You can do this by copying and pasting the whole regulated activity table.

2. Locations – For each location registered for a particular regulated activity (including your headquarters), please provide a brief description, including whether the services at that location are specifically adapted or suitable for people with particular needs or where you can meet requirements for special facilities or staffing. You can do this by copying and pasting the relevant lines for each location. You may also give details around 'listed buildings', shared occupancy, and special facilities (for example hydrotherapy pools).

3. Overnight beds – If the location provides overnight beds, please state the number.

4. Registered manager(s) – Where the regulated activity is managed by a registered manager(s), please enter his or her full name, contact address (if different from the location address), telephone number and email address. Please state how much time is spent managing the regulated activities where more than one manager is in post for each location. This may be in days or hours. Where the regulated activity has no separate manager but is managed directly by the provider, leave the box empty.

5. Service user band(s) – Tick all the boxes that describe the service user needs or groups of people who use your service.