

Statement of purpose

Health and Social Care Act 2008

Saville Medical Group

Dr J V Salkeld

Dr J G B Kent

Dr R A Flint

Dr L A Robinson

Dr P Lamballe

Dr D F Cumberlidge

Dr M A Wright

Statement of purpose

Health and Social Care Act 2008

Version	1	Date of next review	2016
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Service provider

Full name, business address, telephone number and email address of the registered provider:

Name	Saville Medical Group
Address line 1	7 Saville Place
Town/city	Newcastle Upon Tyne
County	Tyne and Wear
Post code	NE1 8DQ
Email	Saville.med@nhs.net
Main telephone	0191 232 4274

ID numbers

Where this is an updated version of the statement of purpose, please provide the service provider and registered manager ID numbers:

Service provider ID	1-199690156
Registered manager ID	

Aims and objectives

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:

1. The provision of general medical services from cradle to grave.
2. Provision of health promotion and disease prevention for our patient population.
3. Offering a range of high quality services to our patients.
4. Care of patients with chronic diseases.
5. Extended hours to accommodate patients who are unable to see a doctor during usual working hours.

6. Holistic approach to patient care by utilising the skills and competencies of the whole team.

7. End of life pathway.

Legal status

Tick the relevant box and provide the information requested for the type of provider you are:

Use

Individual

Partnership

List the names of all partners

1. Dr Judith Victoria Salkeld
2. Dr Jeremy George Brian Kent
3. Dr Rupert Adam Flint
4. Dr Louise Ann Robinson
5. Dr Philip Lamballe
6. Dr Duncan Frank Cumberlidge
7. Dr Marie Anne Wright

Limited liability partnership registered as an organisation

Incorporated organisation

Company number

Are you a charity?

No

Yes

Charity number:

Group structure (if applicable)

Please repeat the following table for each of your regulated activities¹

Regulated activity 1 <i>As shown on your certificate of registration</i>	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 services for our registered patients and, on occasions, patients registered with other GP practices or temporary residents.
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	Saville Medical Group – Saville Place
Address line 1	7 Saville Place
Address line 2	Newcastle Upon Tyne
Address line 3	Tyne and Wear
Address line 4	NE1 8DQ
Brief description of location²	Primary care centre consisting of 11 GP consulting rooms, 9 other consulting rooms, 1 NHS CPN room, 4 Nurse consulting rooms, 2 receptions, 2 waiting areas, 3 patient toilets, 3 staff toilets, 3 staff kitchens, 1 boardroom, 1 practice managers room, 1 IT room, 1 secretarial room, 7 admin rooms and 4 storage rooms.
No of approved places/beds (not NHS)³	N/A
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered manager.</i> <i>For each registered manager,</i>	Registered manager 1
	Full name: Dr Judith Victoria Salkeld
	Proportion of working time spent at each location (for job share posts only):
	Contact details:

<p>state which regulated activities and locations(s) they manage.</p> <p>Copy and paste the sub-section if they are more than two registered managers</p>	<p>Business address:</p> <p>Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.</p>	
	<p>Telephone: 0191 2324274</p>	
	<p>Email: saville.med@nhs.net</p>	
	<p>Locations:</p> <p>7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.</p>	
	<p>285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.</p>	
	<p>Regulated activities:</p>	
	<p>1. Treatment of disease, disorder and injury</p>	
	<p>2. Surgical Procedures</p>	
	<p>3. Diagnostic and Screenings Procedures</p>	
	<p>4. Maternity and Midwifery Services</p>	
<p>5. Family Planning Services</p>		
<p>Service user band(s) at this location⁵</p> <p>Use <input checked="" type="checkbox"/></p>	<p>Learning disabilities or autistic spectrum disorder</p>	<input checked="" type="checkbox"/>
	<p>Older people</p>	<input checked="" type="checkbox"/>
	<p>Younger adults</p>	<input checked="" type="checkbox"/>
	<p>Children 0-3 years</p>	<input checked="" type="checkbox"/>
	<p>Children 4-12 years</p>	<input checked="" type="checkbox"/>
	<p>Children 13-18 years</p>	<input checked="" type="checkbox"/>
	<p>Mental health</p>	<input checked="" type="checkbox"/>
	<p>Physical disability</p>	<input checked="" type="checkbox"/>
	<p>Sensory impairment</p>	<input checked="" type="checkbox"/>

	Dementia	<input checked="" type="checkbox"/>
	People detained under the Mental Health Act	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	<input type="checkbox"/>
Locations <i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i>		
Location 2:		
Name of location	Saville Medical Group – Newbiggin Hall	
Address line 1	285 Trevelyan Drive	
Address line 2	Newbiggin Hall	
Address line 3	Newcastle Upon Tyne	
Address line 4	NE5 4BP	
Brief description of location²	Primary care centre consisting of 9 GP consulting rooms, 2 Nurse consulting rooms, 1 waiting area, 1 reception, 2 patient toilets, 2 staff toilets, 1 staff kitchen and 1 staff room.	
No of approved places/beds (not NHS)³	N/A	
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered</i>	Registered manager 1	
	Full name: Dr Judith Victoria Salkeld	
	Proportion of working time spent at each location (for job share posts only):	

<p>manager.</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>	Contact details:	
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.	
	Telephone: 0191 2324274	
	Email: saville.med@nhs.net	
	Locations:	
	7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.	
	285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.	
	Regulated activities:	
	1. Treatment of disease, disorder and injury	
	2. Surgical Procedures	
3. Diagnostic and Screenings Procedures		
4. Maternity and Midwifery Services		
5. Family Planning Services		
<p>Service user band(s) at this location⁵</p> <p>Use <input checked="" type="checkbox"/></p>	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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	<input type="checkbox"/>

Regulated activity 2 <i>As shown on your certificate of registration</i>	Surgical Procedures
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>	Minor surgical procedures, excisions, incisions, aspiration and injection as well as cautery, cryosurgery.
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	Saville Medical Group – Saville Place
Address line 1	7 Saville Place
Address line 2	Newcastle Upon Tyne
Address line 3	Tyne and Wear

Address line 4	NE1 8DQ
Brief description of location²	Primary care centre consisting of 11 GP consulting rooms, 9 other consulting rooms, 1 NHS CPN room, 4 Nurse consulting rooms, 2 receptions, 2 waiting areas, 3 patient toilets, 3 staff toilets, 3 staff kitchens, 1 boardroom, 1 practice managers room, 1 IT room, 1 secretarial room, 7 admin rooms and 4 storage rooms.
No of approved places/beds (not NHS)³	N/A
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered manager.</i> <i>For each registered manager, state which regulated activities and locations(s) they manage.</i> <i>Copy and paste the sub-section if they are more than two registered managers</i>	Registered manager 1
	Full name: Dr Judith Victoria Salkeld
	Proportion of working time spent at each location (for job share posts only):
	Contact details:
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.
	Telephone: 0191 2324274
	Email: saville.med@nhs.net
	Locations: 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ. 285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.
	Regulated activities:
	1. Treatment of disease, disorder and injury
2. Surgical Procedures	
3. Diagnostic and Screenings Procedures	
4. Maternity and Midwifery Services	

5. Family Planning Services		
Service user band(s) at this location⁵ Use <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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
None of the above Please give details:	<input type="checkbox"/>	
Locations <i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i>		
Location 2:		
Name of location	Saville Medical Group – Newbiggin Hall	
Address line 1	285 Trevelyan Drive	
Address line 2	Newbiggin Hall	

Address line 3	Newcastle Upon Tyne
Address line 4	NE5 4BP
Brief description of location²	Primary care centre consisting of 9 GP consulting rooms, 2 Nurse consulting rooms, 1 waiting area, 1 reception, 2 patient toilets, 2 staff toilets, 1 staff kitchen and 1 staff room.
No of approved places/beds (not NHS)³	N/A
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered manager.</i> <i>For each registered manager, state which regulated activities and locations(s) they manage.</i> <i>Copy and paste the sub-section if they are more than two registered managers</i>	Registered manager 1
	Full name: Dr Judith Victoria Salkeld
	Proportion of working time spent at each location (for job share posts only):
	Contact details:
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.
	Telephone: 0191 2324274
	Email: saville.med@nhs.net
	Locations: 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ. 285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.
	Regulated activities:
	1. Treatment of disease, disorder and injury
2. Surgical Procedures	
3. Diagnostic and Screenings Procedures	

	4. Maternity and Midwifery Services	
	5. Family Planning Services	
Service user band(s) at this location⁵ Use <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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
None of the above Please give details:	<input type="checkbox"/>	

Regulated activity 3 <i>As shown on your certificate of registration</i>	Diagnostic and screening procedures
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<p>Services</p> <p><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></p>	<p>General practice services for our registered patients and, on occasions, patients registered with other GP practices or temporary residents. Specific diagnostic procedures eg phlebotomy, microbiology samples and biopsies are undertaken for analysis off-site. Specific screening programmes such as cervical screening are also undertaken for analysis off-site.</p>
<p>Locations</p> <p><i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i></p>	
<p>Location 1:</p>	
<p>Name of location</p>	<p>Saville Medical Group – Saville Place</p>
<p>Address line 1</p>	<p>7 Saville Place</p>
<p>Address line 2</p>	<p>Newcastle Upon Tyne</p>
<p>Address line 3</p>	<p>Tyne and Wear</p>
<p>Address line 4</p>	<p>NE1 8DQ</p>
<p>Brief description of location²</p>	<p>Primary care centre consisting of 11 GP consulting rooms, 9 other consulting rooms, 1 NHS CPN room, 4 Nurse consulting rooms, 2 receptions, 2 waiting areas, 3 patient toilets, 3 staff toilets, 3 staff kitchens, 1 boardroom, 1 practice managers room, 1 IT room, 1 secretarial room, 7 admin rooms and 4 storage rooms.</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,</i></p>	<p>Registered manager 1</p>
	<p>Full name: Dr Judith Victoria Salkeld</p>
	<p>Proportion of working time spent at each location (for job share posts only):</p>
	<p>Contact details:</p>

<p><i>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>Business address:</p> <p>Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.</p>	
	<p>Telephone: 0191 2324274</p>	
	<p>Email: saville.med@nhs.net</p>	
	<p>Locations:</p> <p>7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.</p>	
	<p>285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.</p>	
	<p>Regulated activities:</p>	
	<p>1. Treatment of disease, disorder and injury</p>	
	<p>2. Surgical Procedures</p>	
	<p>3. Diagnostic and Screenings Procedures</p>	
	<p>4. Maternity and Midwifery Services</p>	
<p>5. Family Planning Services</p>		
<p>Service user band(s) at this location⁵</p> <p>Use <input checked="" type="checkbox"/></p>	<p>Learning disabilities or autistic spectrum disorder</p>	<input checked="" type="checkbox"/>
	<p>Older people</p>	<input checked="" type="checkbox"/>
	<p>Younger adults</p>	<input checked="" type="checkbox"/>
	<p>Children 0-3 years</p>	<input checked="" type="checkbox"/>
	<p>Children 4-12 years</p>	<input checked="" type="checkbox"/>
	<p>Children 13-18 years</p>	<input checked="" type="checkbox"/>
	<p>Mental health</p>	<input checked="" type="checkbox"/>
	<p>Physical disability</p>	<input checked="" type="checkbox"/>
	<p>Sensory impairment</p>	<input checked="" type="checkbox"/>

	Dementia	<input checked="" type="checkbox"/>
	People detained under the Mental Health Act	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	<input type="checkbox"/>
Locations <i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i>		
Location 2:		
Name of location	Saville Medical Group – Newbiggin Hall	
Address line 1	285 Trevelyan Drive	
Address line 2	Newbiggin Hall	
Address line 3	Newcastle Upon Tyne	
Address line 4	NE5 4BP	
Brief description of location²	Primary care centre consisting of 9 GP consulting rooms, 2 Nurse consulting rooms, 1 waiting area, 1 reception, 2 patient toilets, 2 staff toilets, 1 staff kitchen and 1 staff room.	
No of approved places/beds (not NHS)³	N/A	
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered</i>	Registered manager 1	
	Full name: Dr Judith Victoria Salkeld	
	Proportion of working time spent at each location (for job share posts only):	

<p>manager.</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>	Contact details:	
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.	
	Telephone: 0191 2324274	
	Email: saville.med@nhs.net	
	Locations:	
	7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.	
	285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.	
	Regulated activities:	
	1. Treatment of disease, disorder and injury	
	2. Surgical Procedures	
3. Diagnostic and Screenings Procedures		
4. Maternity and Midwifery Services		
5. Family Planning Services		
<p>Service user band(s) at this location⁵</p> <p>Use <input checked="" type="checkbox"/></p>	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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	<input type="checkbox"/>

Regulated activity 4 <i>As shown on your certificate of registration</i>	Maternity and midwifery services
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 services offered and provided in conjunction with community midwives for the assessment, treatment and education of patients in the antenatal period as well as post-delivery.
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	Saville Medical Group – Saville Place
Address line 1	7 Saville Place
Address line 2	Newcastle Upon Tyne
Address line 3	Tyne and Wear
Address line 4	NE1 8DQ

Brief description of location²	Primary care centre consisting of 11 GP consulting rooms, 9 other consulting rooms, 1 NHS CPN room, 4 Nurse consulting rooms, 2 receptions, 2 waiting areas, 3 patient toilets, 3 staff toilets, 3 staff kitchens, 1 boardroom, 1 practice managers room, 1 IT room, 1 secretarial room, 7 admin rooms and 4 storage rooms.
No of approved places/beds (not NHS)³	N/A
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered manager.</i> <i>For each registered manager, state which regulated activities and locations(s) they manage.</i> <i>Copy and paste the sub-section if they are more than two registered managers</i>	Registered manager 1
	Full name: Dr Judith Victoria Salkeld
	Proportion of working time spent at each location (for job share posts only):
	Contact details:
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.
	Telephone: 0191 2324274
	Email: saville.med@nhs.net
	Locations: 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ. 285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.
	Regulated activities:
	1. Treatment of disease, disorder and injury
2. Surgical Procedures	
3. Diagnostic and Screenings Procedures	
4. Maternity and Midwifery Services	
5. Family Planning Services	

Service user band(s) at this location⁵ Use <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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
None of the above Please give details:	<input type="checkbox"/>	

Locations

As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity

Location 2:

Name of location	Saville Medical Group – Newbiggin Hall
Address line 1	285 Trevelyan Drive
Address line 2	Newbiggin Hall
Address line 3	Newcastle Upon Tyne

Address line 4	NE5 4BP
Brief description of location²	Primary care centre consisting of 9 GP consulting rooms, 2 Nurse consulting rooms, 1 waiting area, 1 reception, 2 patient toilets, 2 staff toilets, 1 staff kitchen and 1 staff room.
No of approved places/beds (not NHS)³	N/A
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered manager.</i> <i>For each registered manager, state which regulated activities and locations(s) they manage.</i> <i>Copy and paste the sub-section if they are more than two registered managers</i>	Registered manager 1
	Full name: Dr Judith Victoria Salkeld
	Proportion of working time spent at each location (for job share posts only):
	Contact details:
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.
	Telephone: 0191 2324274
	Email: saville.med@nhs.net
	Locations: 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ. 285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.
	Regulated activities:
	1. Treatment of disease, disorder and injury
2. Surgical Procedures	
3. Diagnostic and Screenings Procedures	
4. Maternity and Midwifery Services	

	5. Family Planning Services	
Service user band(s) at this location⁵ Use <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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
None of the above Please give details:	<input type="checkbox"/>	

Regulated activity 5 <i>As shown on your certificate of registration</i>	Family Planning Services
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<p>Services</p> <p><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></p>	<p>Provision of all general family planning advice and prescription of oral contraceptive, emergency contraception, fitting and removal of IUCD devices and contraceptive implants.</p>
<p>Locations</p> <p><i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i></p>	
<p>Location 1:</p>	
<p>Name of location</p>	<p>Saville Medical Group – Saville Place</p>
<p>Address line 1</p>	<p>7 Saville Place</p>
<p>Address line 2</p>	<p>Newcastle Upon Tyne</p>
<p>Address line 3</p>	<p>Tyne and Wear</p>
<p>Address line 4</p>	<p>NE1 8DQ</p>
<p>Brief description of location²</p>	<p>Primary care centre consisting of 11 GP consulting rooms, 9 other consulting rooms, 1 NHS CPN room, 4 Nurse consulting rooms, 2 receptions, 2 waiting areas, 3 patient toilets, 3 staff toilets, 3 staff kitchens, 1 boardroom, 1 practice managers room, 1 IT room, 1 secretarial room, 7 admin rooms and 4 storage rooms.</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,</i></p>	<p>Registered manager 1</p>
	<p>Full name: Dr Judith Victoria Salkeld</p>
	<p>Proportion of working time spent at each location (for job share posts only):</p>
	<p>Contact details:</p>

<p><i>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>Business address:</p> <p>Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.</p>	
	<p>Telephone: 0191 2324274</p>	
	<p>Email: saville.med@nhs.net</p>	
	<p>Locations:</p> <p>7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.</p>	
	<p>285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.</p>	
	<p>Regulated activities:</p>	
	<p>1. Treatment of disease, disorder and injury</p>	
	<p>2. Surgical Procedures</p>	
	<p>3. Diagnostic and Screenings Procedures</p>	
	<p>4. Maternity and Midwifery Services</p>	
<p>5. Family Planning Services</p>		
<p>Service user band(s) at this location⁵</p> <p>Use <input checked="" type="checkbox"/></p>	<p>Learning disabilities or autistic spectrum disorder</p>	<input checked="" type="checkbox"/>
	<p>Older people</p>	<input checked="" type="checkbox"/>
	<p>Younger adults</p>	<input checked="" type="checkbox"/>
	<p>Children 0-3 years</p>	<input checked="" type="checkbox"/>
	<p>Children 4-12 years</p>	<input checked="" type="checkbox"/>
	<p>Children 13-18 years</p>	<input checked="" type="checkbox"/>
	<p>Mental health</p>	<input checked="" type="checkbox"/>
	<p>Physical disability</p>	<input checked="" type="checkbox"/>
	<p>Sensory impairment</p>	<input checked="" type="checkbox"/>

	Dementia	<input checked="" type="checkbox"/>
	People detained under the Mental Health Act	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	<input type="checkbox"/>
Locations <i>As listed on your certificate of registration. Please repeat the section below for each location for this regulated activity</i>		
Location 2:		
Name of location	Saville Medical Group – Newbiggin Hall	
Address line 1	285 Trevelyan Drive	
Address line 2	Newbiggin Hall	
Address line 3	Newcastle Upon Tyne	
Address line 4	NE5 4BP	
Brief description of location²	Primary care centre consisting of 9 GP consulting rooms, 2 Nurse consulting rooms, 1 waiting area, 1 reception, 2 patient toilets, 2 staff toilets, 1 staff kitchen and 1 staff room.	
No of approved places/beds (not NHS)³	N/A	
Name and contact details of registered manager(s) (if applicable)⁴ <i>Full name, business address, telephone number and email address of each registered</i>	Registered manager 1	
	Full name: Dr Judith Victoria Salkeld	
	Proportion of working time spent at each location (for job share posts only):	

<p>manager.</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>	Contact details:	
	Business address: Saville Medical Group, 7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.	
	Telephone: 0191 2324274	
	Email: saville.med@nhs.net	
	Locations:	
	7 Saville Place, Newcastle upon Tyne, Tyne and Wear, NE1 8DQ.	
	285 Trevelyan Drive, Newbiggin Hall, Newcastle upon Tyne, NE5 4BP.	
	Regulated activities:	
	1. Treatment of disease, disorder and injury	
	2. Surgical Procedures	
3. Diagnostic and Screenings Procedures		
4. Maternity and Midwifery Services		
5. Family Planning Services		
<p>Service user band(s) at this location⁵</p> <p>Use <input checked="" type="checkbox"/></p>	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	<input checked="" type="checkbox"/>
	People who misuse drugs and alcohol	<input checked="" type="checkbox"/>
	People with an eating disorder	<input checked="" type="checkbox"/>
	Whole population	<input checked="" type="checkbox"/>
	None of the above Please give details:	<input type="checkbox"/>

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.