



Statement Of Purpose

**Westwood Care Home,
21 Doncaster Road,
Selby
North Yorkshire
YO8 9BT**

**REGISTERED MANAGER:
MRS. YVONNE ANN CLARK**

Date: April 09

In Compliance with
Regulation 4 (1) (c), Schedule 1 – The Care Homes Regulations 2001

THE CARE HOMES REGULATION REQUIREMENTS

Contents

Introduction

1. **A Description of the Care Home and the Physical Environment**
2. **Aims of the Home**
3. **Our Quality Policy**
4. **Resident's Rights**
5. **Facilities and Services**
 - 5.1 Meals
 - 5.2 Medical Care
 - 5.3 Optician and Dentist
 - 5.4 Physiotherapy
 - 5.5 Chiropody
 - 5.6 Hairdressing
 - 5.7 Personal Telephones
 - 5.8 Administration Support
 - 5.9 Benefits Advice
 - 5.10 Shopping
 - 5.11 Laundry
 - 5.12 Dry Cleaning
 - 5.13 Kitchen Facilities
6. **Other Services**
 - 6.1 Resident's Property
 - 6.2 Gifts and Signing Legal Documents
 - 6.3 Arrangements for Pets
7. Name of the registered provider and Home Manager
8. Qualifications and experience of Home manager and Registered provider
9. Number, qualifications and experience of staff
10. Organisational structure of the Home
11. Age range and sex of service users
12. Range of needs that are met
13. Nursing care provision

Contents continued

- 14.** Admission criteria, including emergency admissions
- 15.** Social activities, hobbies and leisure interests
- 16.** Arrangements for resident consultation about the Home
- 17.** Fire precautions and emergency procedures in the Home
- 18.** Arrangements for residents to attend religious services
- 19.** Arrangements for maintaining contact with relatives, Friends and representatives
- 20.** Arrangements for dealing with complaints
- 21.** Arrangements for reviewing service users plans
- 22.** Room sizes and numbers in the Home
- 23.** Therapeutic techniques used in the Home and arrangements for their supervision
- 24.** Arrangements for respecting privacy and dignity
- 25.** Care Quality commission

STATEMENT OF PURPOSE

Introduction

The contents of this Statement of Purpose have been produced to meet the requirements of Schedule 1 – Care Home Regulation 2001. It sets out:

- The mission of the Home
- The quality policy of the Home
- The range of needs intended to be met
- Accommodation
- Qualifications and experience of staff
- Required statutory information
- The rights of residents

1.0 A DESCRIPTION OF THE CARE HOME AND THE PHYSICAL ENVIRONMENT

Westwood is located in the town of Selby, which is in the county of North Yorkshire.

Selby railway station is on the main service connecting the north with the south. Selby also has a good bus service to most surrounding areas

The busy market town of Selby hosts a market every Monday near to the beautiful historical Benedictine Abbey. Selby has other churches mainly of Christian denominations. There are many shops, public houses, restaurants and a library.

Transport is provided by the home for outings and appointments.

There are 10 single bedrooms 1 of which is en-suite and 3 shared rooms 1 of which is en-suite. There is a large combined lounge/ dining room.

Westwood has a large landscaped garden with facilities for residents to sit outside.

Residents are encouraged to bring in personal items of furniture to personalise their own space providing they comply with safety standards. Westwood is undergoing a refurbishment plan and the directors are aiming to provide accommodation and furniture that meet the National Standards.

Westwood is equipped with lifting and bathing aids to meet the varying needs of the client's. Other aids and equipment are assessed and provided by Occupational Therapist and District Nurses on an individual basis as required.

Westwood is cleaned on a daily basis and the Registered Providers and registered Manager strive to maintain the building and the environment to a high standard.

Westwood has gas central heating. All radiators are regulated and have individual thermostat controls. All rooms have adequate ventilation. There is a full fire detection and alarm system that is maintained and complies with fire regulations.

2.0 AIMS OF THE HOME

To provide a high standard of holistic care delivered by well-trained staff.
To foster an atmosphere of care and support which both enables and encourages our residents to live as full, interesting and independent a lifestyle as possible.

3.0 OUR QUALITY POLICY

Westwood is committed to providing quality services for residents by caring, competent, well-trained staff in a homely atmosphere.

This will be achieved by:

- a. Staff development and training programme.
- b. Recruitment of staff who share our values and will care for residents to a high standard
- c. Providing such resources as may be required to ensure that training takes place and is effective.

Our Home will provide services based upon consultation and assessment of the residents needs.

This will be achieved by:

- a. Listening to staff, residents and others with an interest in the Home.
- b. Ensuring that assessments are made which balance risks and needs.
- c. Promoting a level of responsible risk-taking in daily living activity.
- d. The operation of an effective care planning system.

Our Home will involve residents in the planning and review of the services that are provided for them to ensure that their needs are met.

This will be achieved by:

- a. Enabling and empowering residents to influence the services provided in the Home by giving each resident a real say in how services are delivered.
- b. Encouraging residents to become involved in all decisions, which are likely to affect them, either now or in the longer term.

Our Home will consult people about their satisfaction with the service and suggestions for improvement.

This will be achieved by:

- a. Residents' reviews and satisfaction surveys.

Our Home will provide catering services which meet the expectations of residents.

This will be achieved by:

- a. Planned, structured menus, which include residents' wishes, choices and preferences.
- b. Menus which are nutritionally balanced.
- c. Menus which allow residents to change their food choices.

Our Home will ensure that residents are fully informed about all matters, which might affect their well being.

This will be achieved by:

- a. Residents' reviews
- b. Provision of notice boards or other displays, which inform residents.

Our Home will afford all residents and staff an equality of opportunity in respect of living or working in the Home.

This will be achieved by:

- a. An Equal Opportunities Policy and procedure

We will ensure that the Home is a safe and secure place to live.

This will be achieved by:

- a. Ensuring that the physical environment meets all Health and Safety standards.
- b. Providing each resident with a safe and secure place to store his or her valuables.

Our Home will offer a range of social activities, which meet the needs of the residents.

This will be achieved by:

- a. Ensuring that activities are offered to each resident which are appropriate to their needs, abilities or expressed wishes.
- b. Ensuring that the Home considers their social, spiritual, cultural, emotional and physical needs in the services it offers to residents.
- c. Ensuring that residents feel comfortable to decline any or all of the activities offered by the Home.

4.0 RESIDENT'S RIGHTS

- The right to be called by the name of your choice.
- The right to care for yourself as far as you are able.
- The right to take personal responsibility for your own actions and expect all staff to accept that a degree of risk is involved.
- The right to personal privacy at all times and a right to lock your own room door.
- The right to invite whoever you choose into your room.
- The right to independence.
- The right to have your dignity respected and to be treated as an individual.
- The right to receive an anti-discriminatory service which is responsive to your race, religion, culture, language, gender, sexuality, disability and age.
- The right to live your chosen lifestyle.
- The right of access to your own personal records and information relating to decisions made with all staff that affect your life, and where necessary to be assisted with this.
- The right to take an active part in any decisions about daily living arrangements that affect your life.
- The right of access to outside agencies of your choice e.g. doctor, optician, chiropodist etc., and where necessary to be assisted with this.
- The right to look after your own medicines, if you are able to do so.
- The right to control your own finances, if you are able to do so.
- The right to make personal life choices such as what food you eat and what time you get up and go to bed.
- The right to be involved in your own care plan and be involved in any formal reviews of your needs, which take place at regular intervals.
- The right to access a formal complaints procedure and to be represented by a friend, relative or adviser if necessary.
- The right to participate in voting at elections.

5.0 FACILITIES AND SERVICES

5.1 Meals

Your meals will be carefully prepared by our catering staff, meals are as interesting and varied as possible. Residents are offered choices each day and special diets will be catered for.

Choices are available at all meal times. The day usually begins with an early morning cup of tea followed by breakfast, mid-morning tea/coffee and biscuits, 2 course lunch, mid-afternoon tea/coffee and cakes, 2 course evening meal and night time drinks and supper snacks. Fresh fruit is always available and offered daily.

All meals, snacks, supplements and drinks are provided within the fees for service. Special diets are catered for and advice of the dietician is sought where necessary. Limited quantities of alcohol are offered on client's wishes.

5.2 Medical Care - Qualified Nursing and Care Staff

Staff are always on duty to plan and supervise resident's care, ensuring the highest standards at all times. GP's call on request, residents may retain their own Doctor if this is practical. Community nurses and primary care team staff will visit residential care residents as appropriate.

5.3 An Optician and Dentist:-

Health Care opticians visit regularly although you are free to make appointments outside if you prefer. Cheethams dental practice visits the home on request. The National Health Community dentist will also visit on request.

5.4 Physiotherapy: Can be arranged as necessary after a GP referral.

5.5 Chiropody: A private chiropodist visits the Home regularly and is charged for separately. Any resident qualifying for the services of the health authority chiropodist will have this arranged free of charge.

5.6 Hairdressing: A hairdresser visits weekly and is charged for separately. The care staff provide basic hair care. Outside appointments can also be arranged.

5.7 Personal Telephones: The business telephone and fax number is **01757-709901**. There is also a separate line for residents use **01757 702986**. Facilities are also made available for clients that require a personal line.

5.8 Administration Support: is available in the Home via the care staff on duty.

5.9 Benefits Advice: can be provided via the Manager.

5.10 Shopping: Where appropriate we encourage residents to go shopping on their own, with relatives or a staff member. Where this is difficult staff can assist residents by purchasing goods on their behalf within the necessary safeguards of our Personal Finance Policy and Procedure.

5.11 Laundry is undertaken within the Home within the normal fees for service. The home expects all personal clothing to be labelled and can not be held responsible for any loss of items not so marked. There are no facilities for residents to do their own laundry.

5.12 Dry Cleaning: can be arranged at a cost and can be arranged through the care staff.

5.13 Kitchen Facilities comply with the standards laid down by the Environmental Health Department. The Cook manages the Kitchen. These facilities are not accessible to residents owing to Health & Safety and Food Hygiene Regulations. Residents can avail themselves of drinks and snacks at most times by requesting these from care staff.

6.0 OTHER SERVICES

6.1 Resident's Property

The Home will not accept any liability whatsoever for loss of or damage to any money or other valuable property kept (or said to be kept) by the Resident in or about the Home unless such money or property shall have been:

- Identified to the Home in writing with a current written valuation.
- Deposited within the Home's office for safekeeping.

In the case of money, liability will not be accepted unless the money is deposited with the Home for safekeeping and in no event whatsoever for a sum exceeding £500 and in the case of all other property the Home's liability in respect of any item shall not exceed £500. For items above £500 the individual resident is solely responsible for a separate insurance policy to cover that risk. A more detailed position on valuables is outlined in the Service User Guide.

6.2 Gifts and Signing Legal Documents

The Home's employees are not permitted to accept any gifts, and/or presents from residents or to be a known beneficiary in any residents will.

6.3 Arrangements for Pets

The home has a fish tank and the managers dog Archie;
Relatives may bring pets in to the home for a visit provided they are well behaved.

Regulation 4 (1) (c) – Schedule 1

7.0 NAME AND ADDRESS OF THE REGISTERED PROVIDER AND HOME MANAGER

The Registered provider is:

Holistic Care Provision Limited

The registered office is:

Abbey Lea Care Home,

York Road

Barlby

Selby

YO8 5JP

The Registered Manager is Mrs Yvonne Clark.

Address as per front cover.

8.0 QUALIFICATIONS AND EXPERIENCE OF THE HOME MANAGER AND REGISTERED PROVIDERS

Information regarding the registered Home Manager

The Manager Mrs Yvonne Clark has worked in the care sector caring for older people since 1987. Her qualifications include the Registered Managers Award, NVQ level 4 in care, TDLB 32 and 33, (assessment of NVQ's) City and Guilds 325-1 Community Care Practice, First Aid at Work and she is a qualified trainer of Moving and Handling.

She has experience caring for clients suffering from dementia-related illnesses and physical disabilities.

Information relating to the registered provider.

Holistic Care Provision has four directors as listed below:

Mrs K L Shann, Mr D Shilton, Mr J A Conroy and Mrs G M Conroy.

Mrs Karen Shann, is registered as the Responsible Individual who will be undertaking monthly visits under Regulation 26. Mrs Shann has worked in the Health and Social Care sector since 1975 and has been the Registered Provider and Manager of Meadow Lodge Care Home since 1988. She is also a Registered Nurse.

Mrs Gill Conroy has many years experience (from 1984 to present day) of caring for elderly people as Registered Provider of Riccall House Care Home. She qualified as a general nurse in 1976 and also has some psychiatric experience gained at various hospitals and through her work with the Selby branch of the Alzheimer's disease Society. (1990 to 1995)
Other qualifications include City and Guilds Advanced Management for Care and NVQ Assessor and Verifier (TDLB D32, 33 & 34)

Mr Tony Conroy has been a Registered Provider of Riccall House since 1998. He holds an advanced plumbing and heating qualification and worked in the building industry for 25 years. He has the day to day responsibility for the financial affairs and maintenance programmes of Abbey Lea and Westwood Care Homes

Mr David Shilton has been a registered person in control of Meadow Lodge Care Home since 1988. He is presently employed as an Executive_Director of Nursing for South Tyneside Health Care Trust.

His qualifications include 1st level Registered Nurse, Further Education Teachers Certificate, E.N.B. 100 [General Intensive Care] BSc. [Hons] Health Studies.

Westwood intends to remain financially viable, comply with all relevant legislation and remain fit for the future.

9.0 NUMBER, QUALIFICATIONS AND EXPERIENCE OF STAFF

Westwood is staffed in accordance with the requirements of Regulation 18 of the Care Homes Regulations 2001. In particular, we will ensure that as is reasonably possible there will be suitably qualified competent and experienced staff in sufficient numbers as are appropriate for the health and welfare of residents.

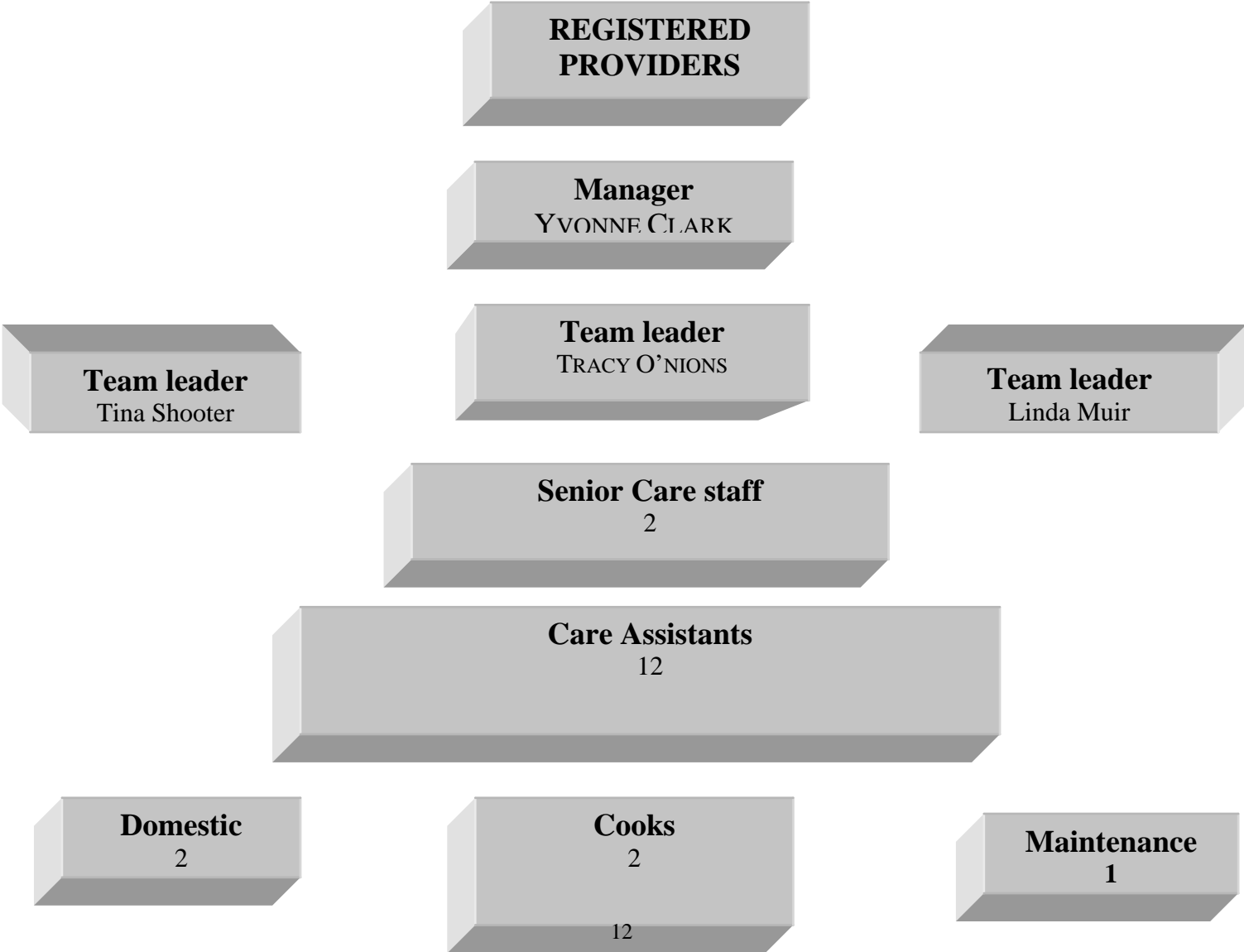
Full details of Names, qualifications and experience of our staff is held in our List of Staff Employed in the Home, which is kept in the office and may be inspected at any reasonable time.

We have a mixture of both mature and younger members of staff. We employ six night care assistants, three team leaders, and two senior carers, seven day care assistants, two cooks, two domestic assistant and one handy man.

We aim to have our Team Leaders qualified to NVQ Level 3 in Care, senior carers and all care assistants to level 2 in care. Both our cooks hold food hygiene qualifications.

The Manager is trained to deliver moving and handling and health & safety training. In house training is carried out regularly throughout the year along with other training bought in from outside trainers, these include Food Hygiene, First Aid, Dealing with dementia, Infection control, Safe Handling of Medicines and any others that are relevant to caring for older people

ORGANISATIONAL STRUCTURE OF THE HOME



11.0 AGE RANGE AND SEX OF SERVICE USERS

Westwood provides long term care services for 16 people aged over 65 years for both male and female clients.

12.0 RANGE OF NEEDS THAT THE HOME IS INTENDED TO MEET

Our Home provides services in the following categories:

Care Home providing personal care

Our Home provides services to the following categories of resident:

Dementia related illnesses

Old Age

13.0 NURSING CARE PROVISION

Westwood does not provide nursing care for service users in the Home although the District Nurses visit our home on referral from the GP's.

14.0 ADMISSION CRITERIA, INCLUDING EMERGENCY ADMISSIONS

The registered Manager or Senior member of staff will undertake a Pre-Admission Assessment prior to all planned admissions, by visiting the client before admission.

In the event of an emergency admission, as much information as possible is requested to complete the Pre-Admission Form. A review would then be carried out within 48 hours following admission.

Our Home's detailed admission criteria is set out in the Cared 4 Quality Management System Procedures:

SD-01 Admission Enquiries for Care Homes.

SD-02 Admission to the Home and associated forms.

15.0 SOCIAL ACTIVITIES, HOBBIES AND LEISURE INTERESTS

Our Home is able to provide a variety of ways that residents can engage in the enjoyment of social activities, hobbies and leisure interests. Residents are consulted individually in relation to their interests and wishes regarding social activities as part of the Service User Planning process and at regular residents meetings.

Care staff are available to assist residents to take part in various board games, jigsaws, quizzes, bingo, discussions, reminiscence and sensory activities (see activities book). They encourage movement to music, listening to music, watching TV, videos and listening to tapes and the radio.

A talking newspaper is delivered to the home weekly.

(The Home currently engages two independent therapists please refer to section 23.)

Care staff are available to take residents for walks in the community, visits to local coffee mornings and to assist with any shopping trips.

A number of short outings are arranged on a regular basis.

We arrange clothes parties about twice a year in the Home and also have entertainers visit about four times a year.

16.0 ARRANGEMENTS FOR RESIDENT CONSULTATION ABOUT THE HOME

Our Home is committed to ensuring that residents are fully consulted about matters which are significant in the running of the Home or about matters which might affect their well being or quality of life. We have a residents committee and the management and staff are available to listen to the views of residents.

The Cared 4 Quality Management System used in the Home includes policies and procedures which try to ensure that effective consultation takes place. These policies and procedures include:

- SD-16 Comments, Suggestions and Complaints
- CI-03 Management Review of the Quality System
- CI-04 Quality Review Group
- CI-05 Internal Audits of the Quality System
- CI-08 Residents' / Relatives' Satisfaction Surveys
- QP-10 Resident's Charter of Rights

17.0 FIRE PRECAUTIONS AND EMERGENCY PROCEDURES IN THE HOME

Our Home's fire precautions have been designed with advice from the Fire Officer and to date all recommendations are implemented following the annual Fire Officer's visit. However, whilst every attempt has been taken to minimise risk of fire there can be no guarantee of safety. The Home undertakes regular fire drills and reviews of procedures. The Home operates a separate fire logbook, which includes, records of fire drills, alarm tests and records of staff training.

All staff are provided with information about the fire procedure at induction. All staff are required to comply with fire training regulations.

Our Home has implemented the Cared 4 Quality Management System which requires the production of emergency policies, procedures and other such arrangements as may be required in situations which may arise. The relevant documents are listed below:

- QP-03 Fire Policy
- SD-22 Emergency Planning
- MA-02 Accident and Incident Reporting
- SD-21 Missing Resident Procedure

18.0 ARRANGEMENTS FOR RESIDENTS TO ATTEND RELIGIOUS SERVICES

Our Home takes all reasonable steps to ensure that each resident's wishes are known and understood in relation to the practice of their chosen religion.

Where requested, we will observe and ensure confidentiality in respect of religious belief or alternatively we will take such steps as may be necessary to enable residents to attend religious services or access religious leaders, ministers or priests in private.

Our Home operates the Cared 4 Quality Management System that contains the following relevant procedures:

MA-15 Confidentiality and Access to Records

QP-10 Resident's Charter of Rights

QP-06 Home Equal Opportunities Policy

SD-03 Assessment and Care Planning

PC-10 Religion

19.0 ARRANGEMENTS FOR MAINTAINING CONTACT WITH RELATIVES, FRIENDS AND REPRESENTATIVES

Our Home actively encourages residents to maintain all forms of social contact that they enjoyed before moving into our Home. We will assist residents to maintain contact if requested.

Our Home is looked upon as a resident's Home and hence, subject to the resident's wishes, visitors are, within reason, generally welcome at any time. It would however be preferred not to have visitors at meal times.

All visitors are requested to enter their details in the 'Visitors Book' and to sign out on departure. Visitors should be made aware that this is to comply with Care Home Regulation 17 & Schedule 4 (17), Health & Safety legislation and Fire Regulations.

Residents can usually receive visitors in their own room or in the lounge.

Visitors wishing to take residents off the premises should speak to the Senior Member of Staff on duty first to ensure that any medication may be provided and that the trip out is within the capacity of the resident. This needs noting in the Visitors Book on departure and return.

Relatives and friends are encouraged to attend social events such as resident's Christmas Party, Summer Fair and entertainment evenings. The Cared 4 Quality Management System contains procedures which demonstrate this. These are shown below:

SD-09 Advocacy

SD-20 Visitors to the Home

20.0 ARRANGEMENTS FOR DEALING WITH COMPLAINTS

Westwood welcomes any Comments, Concerns or Complaints about the services delivered or how to improve the running of the Home. A Complaints, and Grumbles book is available within the home if anyone wishes to make a complaint or have any concerns about the service provided within our Home, all complaints will be treated seriously.

If a resident or relative requires help to make a complaint then they should be afforded advice about potential advocates.

Our Home has implemented the Cared 4 Quality Management System which includes comprehensive arrangements for dealing with Comments, Suggestions and Complaints as detailed below:

QP-01 Comments, Suggestions and Complaints Policy
MA-15 Confidentiality and Access to Records
SD-16 Comments, Suggestions and Complaints

To all residents and their families or representatives – Care Standards Act 2000

Under the above regulations we are required to inform you in writing how a complaint about the home may be made.

Any written complaint received within the home will be recorded and acknowledged in writing by the Manager or her Deputy within 7 working days of receiving the complaint.

You should receive a written answer to your complaint confirming any action that has been taken, within 28 days.

If you feel that your complaint has not been resolved, you, or any person acting on your behalf, may also refer your complaint to the Registered Providers, the

CARE QUALITY COMMISSION

Or the local Ombudsmen who will ensure that any complaint is fully investigated.

CARE QUALITY COMMISSION

St Nicholas Building

St Nicholas Street

Newcastle upon Tyne

NE1 1NB

Tel :- 01912333300

Fax:- 01912333301

The local Ombudsman is at,

Beverley House,

17 Shipton Road,

York

Tel: 01904 380200

21.0 ARRANGEMENTS FOR REVIEWING SERVICE USERS PLANS

Our Home operates a full service user planning and review system as contained in the Carecern System. The procedures and documentation relevant to this process are shown below:

Core care plan

Risk assessment

An initial 6 week and annual review. These take place with full involvement of the service user and their chosen representatives, the Manager of the Home and key worker and the social services care manager when one is allocated. The key workers in consultation with the service users undertake monthly reviews of all care plans.

Access to Personal Records.

Given appropriate notice of seven days service users can access all personal records with the exception of third party information.

22.0 ROOM SIZES AND NUMBERS IN THE HOME

Room Sizes and Numbers		
Room	Dimensions (Metres)	Total Floor area (Square metres)
Bedroom No 1	3.9 *3.7 =14.45m²	21.45m²
Ensuite toilet	2.1*3.3 =7m²	
	2*1.3	2.6m²
Bedroom No 2...	4.2*3.9	16.4m²
Bedroom No 3...	4.4*4.4	19.36m²
Bedroom No 4...	4.5*2.6	11.7m²
Bedroom No 5...	4.1*2.5	10.37m²
Bedroom No 6...	5.2*3.4	17.68m²
Bedroom No 7...	3.7*3.2 =11.84m²	12.35m²
	1.7*.300 =.510m²	
Ensuite toilet	1.2*1.9	2.28m²
Bedroom No 8...	4.5*2.4	10.8m²
Bedroom No 9...	3.5*2.65 =9.28m²	10.73m²
	1.*1.45 =1.45m²	
Bedroom No 10...	3.7*2.4 =8.88m²	10.05m²
	1.3*.900 =1.17m²	
Bedroom No 11...	4.5*2.1 =9.45m²	10.44m²
	1.1*.900 =.99m²	
Bedroom No 12...	4.2*2.6 =10.92m²	14.76m²
	1.2*3.2 =3.84m²	
Bedroom No 13...	2.8*3.8 =10.64	14.7m²
	1.4*2.9 =4.06m²	
Bathroom		
Bathroom		
WC		
Staff WC		
Kitchen		
Laundry / Sluice		
Lounge / Dining room	9.050*7.2	65.16m²
Staff Office		
Managers Office		
Staff room		

23.0 THERAPEUTIC TECHNIQUES USED IN THE HOME AND ARRANGEMENTS FOR THEIR SUPERVISION

a	Aromatherapy	A State registered nurse qualified to offer aromatherapy visits the Home fortnightly.
b	Physiotherapy	These classes are instructed by a qualified physiotherapist who visits fortnightly.
c	Manicures	All Staff
D	Tia Chi	To be undertaken by A qualified Tia Chi instructor

This list is not exhaustive

24.0 ARRANGEMENTS FOR RESPECTING PRIVACY AND DIGNITY

Staff are instructed during their induction, to respect residents rights and preserve their dignity at all times.

Arrangements for ensuring that our residents are treated with respect and dignity are clearly shown in all our policies, procedures and actions.

Some of our clients' rooms have lockable doors. Staff would only use the master key in the case of an emergency.

The Cared 4 Quality Management System which clearly demonstrates our commitment to privacy and dignity, contains the following relevant procedures:

QP-10 Resident's Charter of Rights

The Homes' Quality Policy see Cared 4 Quality Manual Section No. 4 page 3-5.

25.0 COMMISSION FOR SOCIAL CARE INSPECTION

This is a National body, which regulates the conduct of Care Homes in England. There are a number of Regional Offices from which Commissioners carry out the duties. Our Home is part of the North Eastern Regional Contact Team
They can be contacted in writing at the address below or by

Care Quality Commission
St Nicholas Building
St Nicholas Street
Newcastle upon Tyne
NE1 1NB
Telephone 0191 233 3300
Fax:- 0191 233 3301