

# **Statement of purpose**

Health and Social Care Act 2008

## **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: | 5 | Managers working for the provider shown in part 1 |
|--|---|----------------|---|---|

|                               |                           |
|-------------------------------|---------------------------|
| <b>1. Manager's full name</b> | Alexander James Jon Blyth |
|-------------------------------|---------------------------|

| <b>2. Manager's contact details</b>  |   |
|--|---|
| <b>Business address</b>  | Warwickshire Supported Living Service<br>227 Coton Road<br><br><b>CQC Location ID: 1-8361039722</b> |
| <b>Town/city</b>   | Nuneaton  |
| <b>County</b>  | Warwickshire  |
| <b>Post code</b>   | CV11 5TU  |
| <b>Business telephone</b>  | 02476 342313  |
| <b>Manager's email address<sup>1</sup></b>                                       |   |
| <a href="mailto:alexiblythe@praxiscare.org.uk">alexiblythe@praxiscare.org.uk</a> |   |

<sup>1</sup> 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.

| <b>3. Locations managed by the registered manager at 1 above</b>  |  |
|---|--|
| (Please see part 3 of this statement of purpose for full details of the location(s))  |  |
| <b>Name(s) of location(s) (list)</b>  | <b>Percentage of time spent at this location</b> |
| Warwickshire Supported Living Service<br>227 Coton Road<br>Nuneaton<br>Warwickshire<br>CV11 5TU<br><br><b>CQC Location ID: 1-8361039722</b> | 100%   |

| <b>4. Regulated activity(ies) managed by this manager</b>                        |                                     |  |
|--|-------------------------------------|--|
| Personal care  | <input checked="" 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 type="checkbox"/>            |  |
| Assessment or medical treatment for persons detained under the Mental Health Act | <input type="checkbox"/>            |  |
| Surgical procedures  | <input type="checkbox"/>            |  |
| Diagnostic and screening procedures  | <input 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 type="checkbox"/>            |  |
| Termination of pregnancies   | <input type="checkbox"/>            |  |
| Services in slimming clinics   | <input type="checkbox"/>            |  |
| Nursing care   | <input type="checkbox"/>            |  |
| Family planning service  | <input type="checkbox"/>            |  |

**5. Locations, regulated activities and job shares**

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.

Please also describe below any job share arrangements that include or affect this manager.

N/A