



COQC FOR HEALTHCARE PROVIDERS.

AN EXPERT GUIDE BY:



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Semble

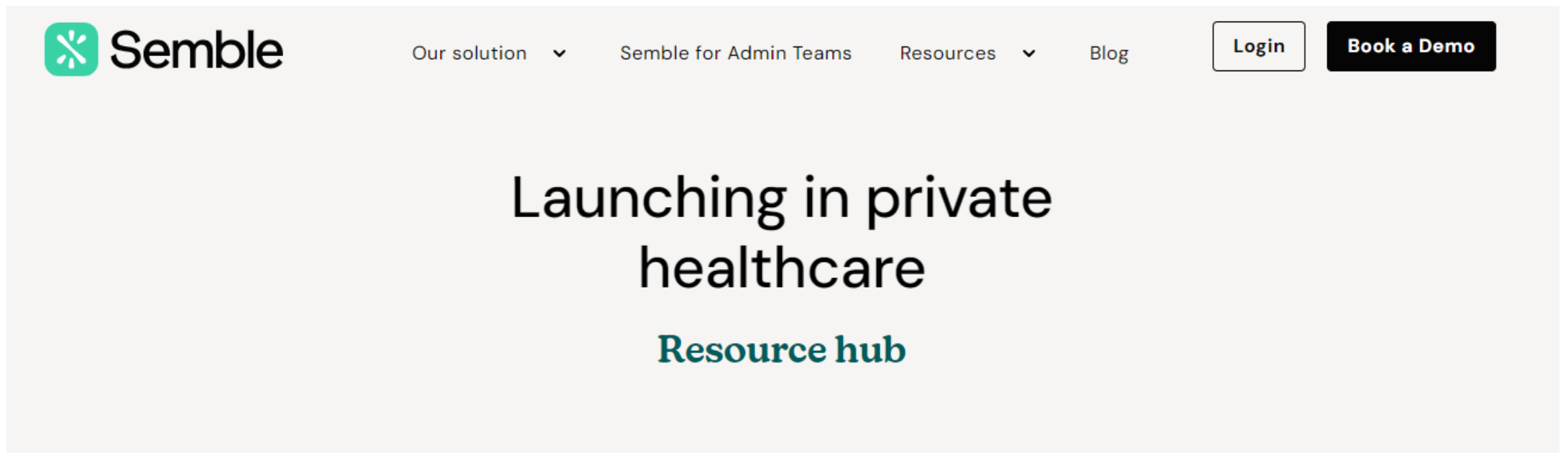
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If you provide **health and social care services** in England,

You need to register with the CQC.



This carousel is adapted from the
following resource:



Passing CQC

Key articles outlining everything you need to know about passing your CQC inspection from expert doctors who know it all inside and out.



Dr Jonathan Andrews



Dr. Anthony Langham



Pascale Day

Available here:

<https://www.semble.io/launching-in-private-healthcare>

**There are 4 key sections
to this carousel:**

SECTION 1:	What is the CQC?
SECTION 2:	How to register for the CQC.
SECTION 3:	How to prepare for the CQC inspection.
SECTION 4:	Ongoing requirements for the CQC.

SECTION 1:

WHAT IS THE CQC?

In this section,

We will introduce the CQC - who they are, what they do and why it is important for you to be familiar with their work.

1. WHAT IS THE CQC?

The CQC stands for Care Quality Commission, it is the regulator of **most health and social care services** in England.

Before you can carry out any of the activities they regulate, **you must register with the CQC.**



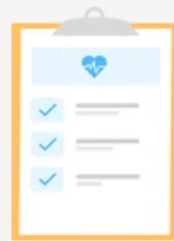
They register care providers.



They monitor, inspect and rate services.



They take action to protect people who use services.



They publish their views on major quality issues in health and social care.

They also have the power to take further action to **improve or close down services** that do not adequately meet the necessary standards.

2. DO I NEED CQC?

As a healthcare provider, being CQC registered is **a legal requirement**.

As part of the application, you have to be able to provide evidence that shows you can provide care to government standards.

To see if your service requires CQC registration, take a look at the full list of service types.

If you're still unsure if your service falls under the requirements for CQC regulation, you can phone on 03000 616161, or email enquiries@cqc.org.uk.

3. WHAT HAPPENS IF I DON'T REGISTER WITH THE CQC?

The CQC has **an enforcement policy**.

If you don't comply with the CQC's enforcement policy, or fail to register with the CQC when required to do so, you could face a **fixed penalty fine of up to £4,000**.

You could also **face prosecution** for failing to register with the CQC when required to do so.

This could be an **unlimited court fine amount**, or **up to 12 months imprisonment**.



SECTION 2:

HOW TO REGISTER WITH THE CQC.

In this section,

We cover who needs/don't need to be registered with the CQC, how to register, key terms to know as well as the registration interview process.

4. WHO NEEDS TO BE REGISTERED?

If you carry out a 'regulated activity' in England, then you must register with the CQC.

It is your responsibility to check which **regulated activity (or activities)** you are looking to provide, and apply to register for this in advance of providing the service.

Even if you won't be providing this service on a permanent or regular basis, it is an offence to carry out a regulated activity without being registered - **so check carefully!**



5. WHAT IS A REGULATED ACTIVITY?

A ‘regulated activity’ is described as “an activity involving, or connected with, the **provision of health or social care**” under Section 8(1) of the Health and Social Care Act 2008.

The following list is a summary of the **14 currently regulated activities**:

- Personal care for people who are unable to provide it for themselves because of old age, illness or disability
- Accommodation for people who require nursing or personal care
- Accommodation for people who require treatment for substance misuse
- Treatment of disease, disorder or injury.
- Assessment or medical treatment for persons detained under the Mental Health Act 1983
- Surgical procedures
- Diagnostic and screening procedures
- Management of supply of blood and blood-derived products
- Transport services, triage and medical advice provided remotely
- Maternity and midwifery services
- Termination of pregnancies
- Services in slimming clinics
- Nursing care
- Family planning services

6. WHO IS RESPONSIBLE TO REGISTER?

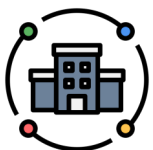
Applicants registering with the CQC are known as '**service providers**'. A service provider is the legal entity who will be carrying out the regulated activity, and may be:



An **individual** (sole traders)



A **partnership** (need to register as a single entity, listing name of partners)



An **organisation** (Local authorities, NHS trust, registered companies, charities etc)

For subcontracted services, the legal entity **directly responsible for carrying out the regulated activity should register**, even if the service is part of a broader pathway of care.

7. WHAT ABOUT THE OTHER COUNTRIES IN UK?

The CQC only regulates providers inside **England**, who provide services to Patients in England.

For the other UK countries, there are:



WALES



NORTHERN IRELAND



SCOTLAND

8. EXEMPTIONS FROM CQC REGULATIONS

There are a number of **exceptions and exemptions** to registering with the CQC:

- . **Medical practitioners in independent practice**
- . **Individual budgets, self-funded nursing care, and personal care**
- . **Introductory or employment agencies**
- . **Third-party exceptions**
- . **Other exceptions**

Whenever in doubt, contact the CQC to understand whether your services will require regulation or not.

9. HOW DO I APPLY?

Application is online via the Portal which is [accessed from the CQC website](#).

The application form is a **21-page document** which requests the following information:

- Proof of identity
- Your contact details
- Your personal address
- Details of the business you're applying for
- Applicable regulated activities
- Confirmation of DBS checks
- Recent photographs
- Full employment history with the dates of your employment, the role and your reason for leaving the job
- Your past medical history and its potential impact on your ability to act as a registered Manager
- Any professional registered bodies that you might be a member of whether you are the subject of any investigations relating to health and social care

It's advised to allow up to **eight hours** to complete this.

10. KEY TERMS TO KNOW



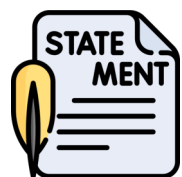
Registered Manager

All types of providers, including partnerships, organisations, and sole-traders, must appoint a Registered Manager **who oversees the daily operation of regulated activities.**



Nominated Individual

When seeking registration, CQC will instruct you to nominate an individual as the primary contact - this is your 'Nominated Individual'. This will preferably be **a senior figure with authority and responsibility** for supervising the regulated activity.



Statement of Purpose

A Statement of Purpose is a business's mission statement that outlines its **activities, locations, and target audience.**



Location

This may include places where the **delivery of regulated activities take place** OR a location where operations are managed.

11. HOW LONG DOES IT TAKE?

You can't start providing any regulated activities for this particular unregistered service whilst awaiting your registration interview.

The CQC website advises it takes at least 10 weeks to progress from submission to interview - however in some cases this has taken significantly longer, even around six to nine months.

So prepare to be patient.

12. THE REGISTRATION INTERVIEW

The CQC Registration team conducts a **30-60 minute interview** with the Registered Manager.

This is likely to be **virtual**, via Teams or Zoom.

For the interview, it's advisable to **have a copy of your application form with you**, a copy of the essential standards, and a copy of the company's Statement of Purpose.

Questions you may be asked include:

- How do you define your job role at this business?
- How long have you worked for this business and how many days per week do you work there?
- What is your understanding of your legal responsibilities as a Registered Manager?
- What notifications do you have to send to the CQC and when?
- How does your company approach equality, diversity and inclusion?
- How do you ensure you gather valid consent for each patient?
- What is your process to recruit suitable and qualified staff for the job?
- How would you investigate an allegation of abuse within the practice?
- Explain your whistleblowing policy.
- Explain your infection control processes.
- Where would you look up the CQC requirements?

SECTION 3:

ASSESSMENT AND INSPECTION

In this section,

We explore the process of a CQC inspection, the kind of evidence they collect and what happens after.

13. WHAT IS A CQC INSPECTION?

All CQC service providers are **subject to regular inspections** in order to monitor the service being delivered.

The frequency of inspections, the size of the inspecting team, and whether the CQC informs the service of when they are visiting is related to:

- . The **type of service** that is being inspected,
- . The provider's **previous rating**,
- . The **CQC analysis risk**.



14. WHEN CAN I EXPECT AN INSPECTION?

The CQC will try to inspect your service **within the first 12 months of your registration.**

They don't tend to announce an inspection as they'd ideally like to see the regular day-to-day running of your service.

You might, however, **receive a short notice** (48 hours) of inspection if:

The inspection is likely to have a negative impact on your patients.

If your service opens on different times or days of the week.

The service is delivered across a large geographical area.

15. WHAT CAN I EXPECT FROM AN INSPECTION?



Before your physical inspection, you will be asked to provide **some key documentation** and upload it to the [CQC portal](#).



To begin your on-premises inspection, the CQC inspectors will usually **meet with the senior staff** at your service.



This will involve the inspectors introducing themselves, providing **the scope and purpose of the inspection** and how findings will be communicated.

It is quite common practice for the service provider to also **provide a short presentation**.

This could include a review of your service, as well as any findings and views on your performance.

16. THE FIVE KEY LINES OF ENQUIRY

The CQC's 'Five Key Lines of Enquiry' will be asked of all care services. Each of these will be given a rating, as well as an 'overall rating' for your services.

An easy way to remember these questions is with the acronym **CREWS**.

These questions are as follows:

- Is this service **caring**?
- Is this service **responsive** to people's needs?
- Is this service **effective**?
- Is this service **well led**?
- Is this service **safe**?



C

Caring



R

Responsive



E

Effective



W

Well led



S

Safe

17. THE CQC EVIDENCE CATEGORIES

The CQC has made significant changes recently on the type of evidence used to assess services.

There are **six different types of evidence**:

FEEDBACK FROM SERVICE USERS

This is all types of evidence from people using your service, such as **feedback forms** conducted, direct feedback to the CQC, and patient participation groups.

FEEDBACK FROM STAFF

Showing evidence from your workforce, such as the **results of surveys**, will ensure you can generate this evidence. It's also very useful from a business planning point of view.

FEEDBACK FROM PARTNERS

This is evidence from **organisations that your service interacts with** to provide care to patients, such as GP surgeries, other local providers, regulators, or multi-agency bodies.

PROCESSES

The CQC inspection will also use 'processes' as an evidence type. They define processes as '**any series of steps** that are carried out for an organisation to deliver its objectives'.

OUTCOMES

Outcomes are focused on the **impact of care processes on individuals**. They cover how your organisation's care has affected people's physical, functional, or psychological status.

OBSERVATIONS

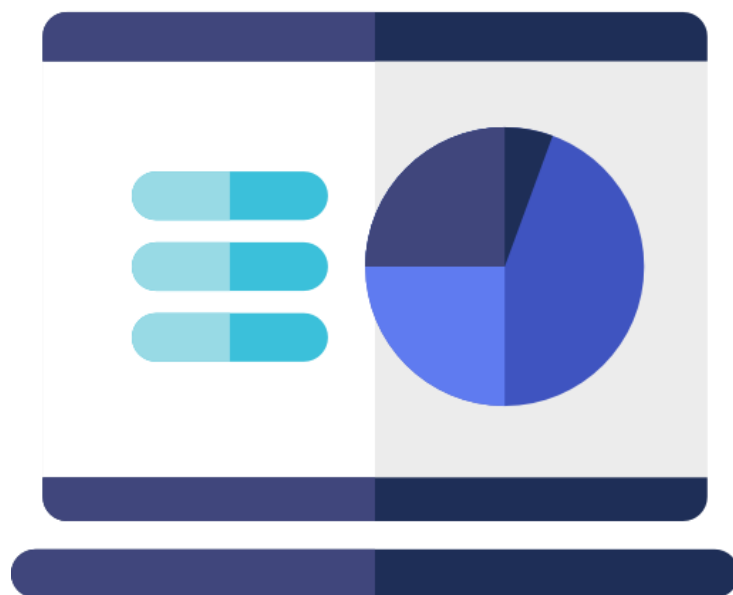
The CQC states on their website that "**observing care and the care environment** will remain an important way to assess quality".

18. WHAT HAPPENS AFTER AN INSPECTION?

At the end of inspection, the inspectors may provide some **immediate feedback**.

This is more the case if there are some immediate areas which they identify need rectifying / answering more urgently.

Typically **a draft inspection report is provided usually within two weeks for review**. Once agreed upon, this and the 'rating' of the provider will be published on the CQC website.



SECTION 4:

ONGOING CQC

REQUIREMENTS

In this section,

We talk about the CQC ratings and what happens after you receive your ratings.

19. WHAT ARE THE CQC RATINGS?

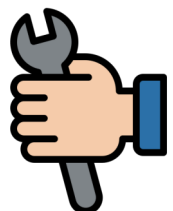
There are **four ratings** that the CQC give to health and social care service providers:



Outstanding: The Service is performing exceptionally well.



Good: The service is performing well and meeting our expectations.



Requires Improvement: The service is not performing as well as it should, and we have told the service how it must improve.



Inadequate: The service is performing badly, and we've taken action against the person or organisation that runs it.

20. WHERE DO I DISPLAY MY RATINGS?

By law, regulated healthcare providers have to display the ratings given to them by the CQC.

This means you must display them in areas that you provide care, somewhere that people who use your service can easily see them.

For traditional bricks and mortar business this means in the waiting area, or by reception.

For digital health businesses this means displaying your rating clearly on your website.



21. HOW OFTEN DO I GET RE-AUDITED?

Most re-inspections are done remotely once a month.

(Initial inspection done in person.)

Physical inspections are saved for:

- Where concerns have been raised**
- Larger organisation's & premises - care home/hospitals/dental surgeries etc**



Hope you all found this helpful!



This is part of a series to help
HealthTech founders access better
resources for their projects.

For more resources, visit:
<https://adoptadoc.com/resources/>