

Registration with the Care Quality Commission

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Christian Head Care Home in Kirkby Stephen, Cumbria

Introduction

The Care Quality Commission is the independent regulator of health and social care services in England. This includes care homes, hospitals, dental services, clinics, services in the home, general practitioners, mental health services and services in the community. It is an executive non-departmental public body of the Department of Health and Social Care of the United Kingdom. It was established in 2009 under the Health & Social Care Act 2008.

The Care Quality Commission's stated role is to make sure that care services in England provide people with safe, effective and high-quality care, and to encourage those providers to improve. It carries out this role through checks during the registration process which all new care services must complete, as well as through inspections and monitoring of a range of data sources that can indicate problems with services. The commission's remit also includes protecting the interests of people whose rights have been restricted under the Mental Health Act.

The Care Quality Commission regulates providers of 'health or social care in, or in relation to, England', where:

- 'Health care' includes all forms of health care provided for individuals, whether relating to physical or mental health, and also includes procedures that are similar to forms of medical or surgical care but are not provided in connection with a medical condition.
- 'Social care' includes all forms of personal care and other practical assistance provided for individuals who by reason of age, illness, disability, pregnancy, childbirth, dependence on alcohol or drugs, or any other similar circumstances, are in need of such care or other assistance.

Any person (individual, partnership or organisation) who provides regulated activity in England must be registered with the Care Quality Commission otherwise they commit an offence. The purpose of this briefing paper is to outline the process for registering with the Care Quality Commission as a provider of care.

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Summary

A provider must register with the Care Quality Commission if they carry on one of the activities they regulate. To be registered, an application must be made to the Care Quality Commission, providing details about the applicant, the regulated activities applied for, and the places at which, or from which, it will be provided (called 'locations').

The Care Quality Commission assesses the applicant and, to grant registration, must be satisfied about their fitness and compliance with the requirements of the relevant regulations and enactments. Otherwise they must refuse their application. The term 'fitness', the regulated activities and the wider registration requirements are set out in the Health and Social Care Act 2008 and its associated regulations.

When the Care Quality Commission registers a person, they do so with conditions (about, for example, the locations at which regulated activity may be provided). If, subsequently, the provider wishes to vary or remove any of these conditions, to apply for another regulated activity or to cancel their registration, they must make a further application.

Some providers must have a registered manager as a condition of their registration. Appointed managers must also apply and satisfy the Care Quality Commission about their fitness and meet with the other requirements of the relevant regulations and enactments.

Through this system of registration, the Care Quality Commission ensures that only those people who are judged to be fit and are likely to provide and manage good quality care that meets the needs of people, are authorised to do so.

Scope of Registration

A provider must register with Care Quality Commission if they provide, or intend to provide, health or adult social care activities in England. This is a legal requirement under the Health and Social Care Act 2008. They must apply to be registered even if they do not intend to provide those services on a regular or permanent basis. It is an offence to carry on a regulated activity without being registered.

To make sure they have all the information to register correctly an intending provider must read the guidance and refer to the Health and Social Care Act 2008 and associated regulations and the guidance on meeting the regulations. The Care Quality Commission has also issued guidance on how to register as a new provider and how to make changes to a registration.

To decide whether and how an organisation needs to register with Care Quality Commission, they may find it useful to ask the following questions:

- Will I be carrying on a regulated activity? If so, which will apply to me?
- Who will be responsible for directing and controlling the regulated activity?
- Will any exceptions apply?
- Where will the regulated activity be carried on at or from?
- Is a registered manager required at any or all locations?
- If I am intending to provide services to children, do these activities need to be registered with Care Quality Commission, Ofsted or both?

A service provider can be an individual, a partnership, or an organisation (for example, companies, charities, NHS trusts and local authorities). The Care Quality Commission registers the regulated activity that will be carried on – not service types or professions. To decide whether an organisation must register, it is important to determine what regulated activity will be carried on, and who is responsible for it. It is the legal entity carrying on the regulated activity that must register – not the location or care setting where it is carried out.

It is important to focus on the activities that will trigger the need for registration. This depends on what regulated activity the organisation provides within their 'service type'.

Regulated activity

Section 8(1) of the Health and Social Care Act 2008 describes a regulated activity as 'an activity involving, or connected with, the provision of health or social care'. The activities listed in Schedule 1 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 are the regulated activities specified for the purposes of the Act. If an organisation carries on any of the regulated activities specified in Schedule 1 in England, it must register unless an exception or exemption applies.

There are separate arrangements for regulating health and social care in other UK countries. Care Quality Commission does not normally regulate providers based outside England that offer care and treatment to patients in England. If an organisation is registered in England and intends to provide a service to people living in Scotland, Wales or Northern Ireland, it should contact the respective regulatory authority for that country to check whether it also needs to register with them.

If a health or care service provider from Wales, Scotland or Northern Ireland occasionally delivers services in England (for example, an ambulance service), the Care Quality Commission will take a proportionate and reasonable approach to whether they should also be registered with them.

Types of service provider or legal entity

There are many different types of service provider. A service provider is the legal entity who is carrying on the regulated activity. It may be an individual or an organisation. Organisations that register must satisfy themselves that their directors (or those individuals who perform similar functions) are fit and proper persons.

Where an activity is carried on by a partnership, the partnership needs to be registered as the service provider. The Care Quality Commission do not register each partner individually, but they place a condition on the partnership registration that details the names of each partner. If there are any changes to the membership of the registered partnership, the provider needs to apply to vary that condition. Providers that registered as a partnership before 4 February 2013 did not have this condition, but the Care Quality Commission will add the condition to their registration if they apply to add or remove a partner or make another change to their registration details.

Where a health or care provider is a subsidiary of a bigger parent company and is the legal entity responsible for the service it will need to register in its own right. For example, if several provider companies all trade under the same brand, each company that carries on regulated activities must register individually. The Care Quality Commission will manage their relationship across the parent corporate brand and their published assessments will distinguish clearly between the registered provider and the brand.

Franchise holders are usually separate legal entities to the parent company and must register in their own right. When the Care Quality Commission publish their assessments, they distinguish clearly between the registered provider and the brand. They liaise with the parent company as necessary.

Where an activity is provided as a joint venture between two providers, the venture will often be a corporate entity in its own right and therefore must register. Where the joint nature of the venture is reflected in contracts or agreements rather than in how it is organised, each party may need to register depending on the individual case.

Section 75 agreements enable NHS bodies and local authorities to establish joint funding, delegate functions, and integrate resources and management structures, such as integrated community mental health care. These agreements do not usually constitute a new, separate legal partnership and each body that provides a regulated activity must be registered for it separately. Generally, the body that has the original statutory obligation or power to provide the service is the one that should register for it, as it retains accountability for the service.

Services registered with Ofsted

Ofsted is responsible for regulating establishments and agencies that provide children's social care services. The Care Quality Commission does not regulate the accommodation element of any establishment or agency registered with Ofsted in England. However, if health care is also being offered, the provider will need to register with Care Quality Commission separately for the health care element.

The Government guidance on 'Children's homes and health care: registration with Ofsted or Care Quality Commission' explains which regulated activities offered by children's homes are likely to need to register with Care Quality Commission.

The same regulated activities cannot be dual registered with both the Care Quality Commission and Ofsted. Where a provider must register with Ofsted, the parts of its service that Ofsted regulates will be exempt from registration with Care Quality Commission. A provider can still be registered with both regulators, but it cannot be accountable for the same activity.

Hosting and renting arrangements

Hosting is where one provider makes facilities available to another provider to enable it to carry on a regulated activity. In some cases, this may also include support staff such as reception, catering, and housekeeping. It is the provider that carries on the regulated activity that needs to register – not the host.

In these situations, the Care Quality Commission advises hosts to set out the extent of their role in formal agreements with the service provider (for example, through a contract or service level agreement).

Practising privileges

Practising privileges are a well-established system of checks and agreements to enable doctors to practise in hospitals without being directly employed by them. Doctors sometimes rent consulting rooms to conduct private outpatient appointments in independent hospitals and in private facilities within an NHS hospital. Where these doctors provide a consultation in a service that is managed by the hospital, and the doctors have agreed practising privileges, the consultation may be covered by the hospital's registration.

Practising privileges are different to normal renting and sub-contracting arrangements because they have a specific exemption in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. For this exemption to apply, all aspects of a consultation must be carried out under the hospital's management and policies. It means that the hospital retains responsibility for ensuring that all regulations and relevant requirements are met.

Doctors (or other healthcare professionals) can also sometimes practise in outpatient departments under their own arrangements, with the hospital only acting as landlord. Where this happens, and the doctor or other healthcare professional is carrying on regulated activities independently of the hospital, they must register as this does not amount to the exercise of practising privileges, unless they are exempt for other reasons.

Subcontracted services

If a subcontractor provides treatment or care services that include a regulated activity, they will usually need to register in their own right. This will always depend on the nature of the subcontracting arrangement. But if a subcontractor does not provide treatment or care directly, such as providing equipment or support services that do not include providing a regulated activity (for example, catering or cleaning) they will not need to register.

Generally, a subcontractor with a contract to supply part of a wider and more comprehensive service should register for any regulated activity they carry on if they retain any responsibility for delivering the service (such as the operational policies and protocols, day-to-day operational or staff management, clinical governance or quality assurance).

The provider that sub-contracts the work makes a commercial decision on who is responsible for delivering the regulated activity or activities. Commercially, the legal accountability for the quality of care remains the responsibility of both the provider and the sub-contractor. However, for registration under the Health and Social Care Act 2008, Care Quality Commission will hold accountable the legal entity that is directly responsible for carrying on the regulated activity.

Secondments and similar service level agreements

In some cases, a service provider uses staff from another organisation who are 'loaned' to it, through a secondment or similar agreement, for a certain proportion of their time. This arrangement does not make the delivery of the regulated activity a joint service (which might require both provider A and B to register for it). Instead, the original employer of the nursing staff is acting as a staffing agency. For the period in which the nursing staff have been seconded to work for and be managed by provider A, they are part of provider A. In this situation, provider B does not need to register for the service provided by provider A. This is often the case with arrangements for community mental health services.

Registration of managers

A manager is a person who is in day-to-day charge of delivering a service provider's regulated activity, or a service provider's regulated activity in a particular location. The Care Quality Commission (Registration) Regulations 2009 set out the circumstances in which a service must have a registered manager as a condition of its registration. These are:

- Any service provider that is an organisation – whether corporate (for example, a company) or unincorporated (for example, a partnership or a charity) – must have a registered manager for every regulated activity that it carries on, unless it is a health service body. Health service bodies such as English NHS trusts do not need to have a registered manager unless the Care Quality Commission imposes a condition on their registration that requires one. Others – including independent organisations that work under contract to the NHS – must always have a registered manager.
- If the service provider is an individual, they do not need to have a registered manager unless they are not a fit person to manage the regulated activity, or they do not intend to be in day-to-day charge of how the regulated activity is provided.

When the Care Quality Commission registers NHS trusts that have a care home and provide the regulated activity of accommodation for persons who require nursing or personal care, the Care Quality Commission will use discretion and may impose a condition to have a registered manager. This is because the Care Quality Commission consider the role of a manager who is in day-to-day charge of these services to be fundamental to providing positive outcomes for people who use the service.

To assess whether an individual is a fit person to manage the regulated activity, the Care Quality Commission considers whether they are:

- Of good character.
- Physically and mentally able to manage the activity.
- Able to demonstrate that they have the necessary qualifications, competence, skills and experience to manage how the regulated activity is carried on.
- Able to provide the following required information: proof of identity; enhanced Disclosure and Barring Service check with barred list information; employment history including evidence of conduct and reason for leaving, where the work involved children or vulnerable adults; records of qualifications; and evidence of health.

Registered managers can be registered for more than one regulated activity. They can also be responsible for more than one location if they can provide evidence that they are able to do this effectively.

General exceptions and exemptions from registration

A number of general exceptions may apply to registration with the Care Quality Commission (see Schedule 2 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014). These include exceptions that: clarify which aspects of a service do not need to be registered separately, apply to certain types of provider, and apply only in certain circumstances.

Where a provider is exempt from the need to register for a specific regulated activity or if an exception under Schedule 2 applies, they should still check if they need to register for any other regulated activities.

Regulated activities

Regulated activities are detailed in Schedule 1 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. If the general exceptions and exemptions do not apply to an organisation, it must register for each regulated activity that it provides, unless a specific exemption applies. An organisation must be sure that the service it provides is covered by the regulated activities it registers for. Some providers may need to register for several regulated activities.

Each regulated activity requires a separate registration. There is no hierarchy of regulated activities — they are all equally important and an organisation must apply for all that relate to its services. Sometimes, registration for one regulated activity will remove the need to register for another. For example, a provider will not need to apply for personal care where it is delivered as part of accommodation for persons who require nursing or personal care, accommodation for persons who require treatment for substance misuse, or treatment of disease, disorder or injury.

However, wherever nursing care or personal care is provided in its own right (not as part of another regulated activity), then a provider may need to register for it as a regulated activity, even if the provider is registered for other regulated activities.

Regulated activities include:

- Personal care
- Accommodation for persons who require nursing or personal care
- Accommodation for persons who require treatment for substance misuse
- Treatment of disease, disorder or injury
- Assessment or medical treatment for people 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

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- Maternity and midwifery services
- Termination of pregnancies
- Services in slimming clinics
- Nursing care
- Family planning services

Personal care

Personal care is defined in Regulation 2 (Interpretation) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The regulated activity of Personal care involves providing personal care for people who are unable to provide it for themselves because of old age, illness or disability. The personal care must be provided in the place where those people who need it are living at the time when the care is provided.

This regulated activity also includes Shared Lives schemes where the provider of the scheme is registered for personal care – not the owners of the individual homes. If an organisation is carrying on the regulated activity of treatment of disease, disorder or injury, it does not also need to register for personal care if it delivers this as part of the treatment. However, if it provides personal care to people who are not also receiving treatment for a disease, disorder or injury, it will need to register for personal care.

This regulated activity does not apply if the service does not provide the activities defined as personal care. See Regulation 2 and Schedule 1(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. It is the nature of the care (activity) being provided that determines the need for registration and which regulated activity is applicable.

Shared lives schemes (referred to in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014) should register only for the regulated activity of Personal care and not the regulated activity Accommodation for persons who require nursing or personal care. This is because:

- The provider of the scheme is registered and not the owners or providers of the individual homes.
- The accommodation aspect of the service supplied by the shared lives carer is out of the scope of the regulations, and the homes where people live are not 'regulated premises' that the commission can inspect.

Shared lives schemes should only register for Personal care where they provide placements for people with personal care needs. If they do not provide this type of placement, they will be out of scope for this regulated activity.

Accommodation for persons who require nursing or personal care

This regulated activity applies where residential accommodation is provided together with nursing care or personal care as a single package, for example nursing or personal care delivered in a care home setting.

A single package means the person using the service cannot choose to receive personal care from another provider while they are living in the accommodation. In the same way, to receive the accommodation they are required to receive their personal care from one specified provider. The accommodation and the care will usually be from the same provider, but they do not need to be, as long as any contractual arrangements make clear who is responsible for carrying on this regulated activity.

If accommodation and personal care are provided separately and people living in the accommodation can choose a different provider to meet their personal care needs, then it may be a supported living or extra care housing service. In this case the regulated activity of Personal care may apply.

An organisation does not have to register additionally for the activities of personal care or nursing care if they provide the regulated activity of accommodation for persons who require nursing or personal care. Where someone living in a care home needs nursing care, this may be provided by care staff where the tasks can be delegated appropriately by a listed healthcare professional who is employed by a provider registered to carry on the regulated activity of Treatment of disease, disorder or injury.

An organisation may need to apply for other regulated activities where these apply. For example, providers of care homes with nursing are likely to need to also register for treatment of disease, disorder or injury if they employ registered nurses or other listed professionals who carry on this regulated activity. There may be exceptions to this principle, but only when registered nursing staff are not employed in their professional capacity and do not actually carry out the treatment for a disease, disorder or injury.

In some cases, this activity includes accommodation together with personal or nursing care provided in an establishment in the further education sector. For this activity to apply in the further education sector, more than 10% of the students receiving both accommodation and education at the establishment must also be receiving personal or nursing care. The commission will normally judge this by looking at the number of students over a twelve month period.

An establishment in the further education sector means an establishment conducted by a further education corporation, or an establishment designated as such by an order of the Secretary of State for Education. This activity does not include providing accommodation for people who require nursing or personal care in schools.

If an organisation provides a shared lives service, it should register only for the regulated activity of Personal care and not for the regulated activity of Accommodation for persons who require nursing or personal care.

Accommodation for persons who require treatment for substance misuse

This regulated activity consists of residential accommodation for people together with treatment for substance misuse. In this regulated activity, 'treatment' covers a range of recognised treatment interventions, such as managed withdrawal or detoxification, or a structured psychosocial treatment programme. It is not limited to treatment provided by a healthcare professional. These types of treatment will always trigger the need to register for this regulated activity if they are provided together with residential accommodation.

'Residential accommodation' is not the same as hospital accommodation where people receive detoxification treatment. For this activity to apply, a service provider must provide the accommodation 'together with' treatment to the same residents. This means that this activity does not apply to hospitals that provide detoxification treatments for substance misuse. The detoxification being provided in the hospital would be covered under the activity of Treatment of disease, disorder or injury.

The treatment for substance misuse does not necessarily need to be provided in the same place as the accommodation, it could be on a different site. For example, the treatment may be delivered in a community setting such as a day centre or community centre, with the people accommodated in separate facilities somewhere else. However, the accommodation and the treatment must be linked so that the accommodation is provided because someone requires and accepts treatment.

An organisation does not have to apply additionally to register for the regulated activities of personal care or nursing care if they provide this activity. This is because they would be covered as part of the treatment provided for the substance misuse. The only exception to this would be if the organisation also provide personal or nursing care as a separate service.

In the same way, an organisation does not also have to apply to register for Treatment of disease, disorder or injury. This is because the treatment for substance misuse is covered under the activity of Accommodation for persons who require treatment for substance misuse. An organisation would only have to apply for Treatment of disease, disorder or injury if it provides other treatments that are separate from the treatment of substance misuse. For example, treating substance misuse includes detoxification, but you would also have to register for Treatment of disease, disorder or injury if:

- A doctor from the team treats a medical condition unrelated to the substance misuse, or is treating an eating disorder
- A registered nurse was managing a holistic care plan for a dual diagnosis patient and administering treatment for both mental illness and for substance misuse.

Locations

Locations may be where a regulated activity is being:

- Delivered to people and may represent a 'service' (for example, a care home or dentist surgery).
- Organised or managed from but the regulated activity is carried out elsewhere (for example, a domiciliary care (home care) agency or community nursing service).

For other services, such as mobile or online services, the location may be either:

- The head office
- A regional office or area base from which day-to-day management of the regulated activities is directed.

If an organisation provides regulated activities in or from more than one location, it will need to include details of all of these in the registration application. It must tell the commission about all the activities to be provided at or from each location. It is important to be clear about locations because in a registration application an organisation must make a declaration about their compliance with regulations for each regulated activity at each location. Once an organisation is registered, the commission will monitor compliance with the regulations at each location.

Registered Managers

Some providers must have a manager who is registered as a condition of the provider's registration. The Care Quality Commission (Registration) Regulations 2009 set out the circumstances in which organisations must have a registered manager. For a manager to be registered, they must meet specific requirements relating to registered managers. In most cases, a provider will need to have one or more registered managers.

As a registered person, the registered manager has legal responsibilities in relation to that position. A registered manager shares the legal responsibility for meeting the requirements of the relevant regulations and enactments with the provider. The person who is appointed as a registered manager should be in day-to-day charge of carrying on the regulated activity or activities they apply to be registered for.

Although the regulations do not prevent a person from being registered to manage several regulated activities, or from managing regulated activity at more than one location, the manager must be able to satisfy the commission that they have the capacity and capability to do so, as well as the necessary skills, qualifications, competence and experience.

The purpose of the registered manager requirement, is to regulate the person managing the regulated activity on a day to day basis at the location where the regulated activity is provided, rather than a more senior manager who is not in day to day charge at the location. An organisation can appoint more than one person to manage a regulated activity at the same location (for example, where there is a job share arrangement).

Nominated Individuals

If an application for registration is made by an organisation, the regulations require it to nominate an individual to act as the main point of contact. The nominated individual must be employed as a director, manager or secretary of the organisation (i.e. they should be a senior person, with authority to speak on behalf of the organisation). They must also be in a position that carries responsibility for supervising the management of the carrying on of the regulated activity (i.e. they must be in a position to speak, authoritatively, on behalf of the organisation, about the way that the regulated activity is provided).

An organisation can nominate the same person for all or some of the regulated activities it provides. Or it can have a different individual for each regulated activity. But it can only nominate one person for each of the regulated activities provided.

In very small organisations, it may be necessary for the same person to be both the registered manager and the nominated individual, but this should be avoided where possible. Where there are concerns about the way a regulated activity is being managed, there will be times when the commission need to speak to a more senior person within the organisation. This is more difficult where the registered manager and the person nominated by the organisation to represent them are one and the same. If an individual or partnership registers, there is no need to have a nominated individual.

Statements of Purpose

A statement of purpose for a business describes what you do, where you do it and who you do it for. Applicants must include a statement of purpose as part of their application and it must include:

- Aims and objectives
- Services provided
- The different needs of people who use the service
- Contact details
- The service's legal entity
- Places where services are provided

The Application Process

Before applying, an organisation will need to:

- Be clear about the application it is making.
- Understand the requirements of the legislation.
- Be able to explain and show how it will follow the regulations.

The commission receives a significant number of applications from domiciliary care agencies for the regulated activity of personal care that do not contain the information that is needed to assess them. These applications are rejected and services are not registered. The commission assesses applications for adult social care providers against their assessment framework. This mirrors the questions they ask when they inspect a service.

The commission validates each of these applications in two stages before formally assessing them:

- Checking they are complete.
- Verifying the questions are answered and supporting information is provided so they can assess the application for registration.

There is no guarantee that registration will be granted: getting a Care Quality Commission countersigned Disclosure & Barring Service and buying policies and procedures online is not sufficient. Applicants should not apply until they have all the required elements in place and can evidence this in their applications. The elements are as follows:

1. How the applicant will meet the Health and Social Care Act 2008 (HSCA 2008) and the associated regulations, relevant guidance and any other laws that apply: training and experience

An applicant must be able to show how they would meet (and continue to meet) the fundamental standards:

- Explain how they will make sure the service is safe, effective, caring, responsive and well led.
- The commission will ask the applicant about these regulations if they assess an application.

To prove that it is competent to manage an applicant must have:

- Relevant qualifications.
- Current up-to-date training.
- Written proof of all qualifications and completed training.
- Evidence that shows competence, skills and experience.

2. Plans and procedures are in place: registered provider applications

An applicant must make sure their proposed registered manager has:

- Relevant qualifications
- Current up-to-date training
- Written proof of all their qualifications and completed training

The applicant must include all supporting documents, including the statement of purpose, with their application. Key staff must understand how policies and procedures apply to their agency and help keep people and staff safe.

3. The applicant and its managers understand what is required of them

The applicant and their managers must understand and have experience of relevant legislation. This includes the:

- Health and Social Care Act 2008 and its associated regulations.
- Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards.

The applicant must also have the qualifications, skills and experience to provide personal care that meets the needs of the people who'll use the service. If an applicant plans to act as the sole company director for a company (provider), and / or proposed registered manager, and / or proposed nominated individual, they must be able to demonstrate their fitness for each of these roles.

4. The applicant's premises are appropriate to deliver personal care

An applicant must include information about how appropriate their premises are. This is within the 'locations' section of the application. An applicant may plan to deliver personal care within people's homes but the commission still need information about the applicant's premises. This is because it is where the regulated activity will be legally carried on and managed from. The commission may refuse an application if they find the premises are inadequate. For example, if people's records are not kept safely and securely.

Process

Being a provider of care is a serious business and the application process reflects this. If the commission agrees to register an organisation, it will have responsibility for people's health and wellbeing. So it's important it is satisfied that the organisation is suitably prepared and will be able to meet the relevant legislation.

The commission assesses applications against their assessment frameworks. These frameworks help applicants to understand expectations at registration. They mirror the questions the commission asks when they inspect a service. There are separate registration assessment frameworks for adult social care providers and healthcare providers.

The commission must establish that applicants will provide services that are safe, effective, caring, responsive to people's needs and well-led. For them to be sure about this, they need to ask for a lot of information. And they need time to assess that information thoroughly. If an applicant cannot meet the standards set out by the five key questions, the commission will refuse the application to register.

Filling in the application could, in some circumstances, take as much as seven or eight hours – a full working day. Preparation work may take several weeks. This includes:

- A Care Quality Commission countersigned Disclosure & Barring Service number.
- A statement of purpose.
- All supporting documents the commission asks for.
- Making sure premises are ready.

All applicants need to supply the commission with a disclosure and barring service number as part of the registration process. For most applicants, the disclosure & barring service check must be countersigned. A Care Quality Commission countersigned disclosure & barring service number is different to one that a person might have from a previous job. If the disclosure & barring service number is not countersigned by the Care Quality Commission it will not be valid and the commission will reject the application. Getting a Care Quality Commission countersigned disclosure & barring service number can take up to eight weeks.

Documents that must be included with an application depend on the type of service that is being registered. In all cases a statement of purpose must be included. Individual providers need to supply details of employment history, GP name and contact details, last employer name and contact details and a declaration of medical fitness. Partnerships need to supply the same information for all partners. Organisations do not need to supply this information for their nominated individual.

Financial viability

An organisation must have the financial resources to provide and continue to provide the services described in its statement of purpose. This is to comply with Regulation 13 of the Care Quality Commission (Registration) Regulations 2009.

An applicant must provide assurance of its financial position in a statement letter from a financial specialist. This person must be one of the following:

- An accountant or accountancy company registered with a recognised accountancy supervisory or qualifying body.
- A bank or financial services firm regulated by the Financial Conduct Authority.

The person providing assurance must not be a relative or friend. This requirement does not apply to NHS Trusts and English local authorities. The following providers are not required to submit the statement letter: NHS GP practices, NHS dentists, NHS 111, out of hours and urgent care services, Non NHS organisations with NHS contracts, Adult social care providers currently in the Market Oversight Scheme.

In exceptional cases it is fair and reasonable for the commission to consider other third party evidence such as a guarantee from an investor or shareholder. They may also ask for more information, such as a business plan, to help with the assessment. The application cannot be approved until assurance has been received.

Conclusions

The Care Quality Commission is the regulator for health and social care services in England. Any individual or organisation that wishes to provide health or social care services must register with the Care Quality Commission. It is an offence to provide such services without a registration. The commission has established assessment frameworks against which applicants are assessed. The registration process is lengthy and thorough and only those individuals and organisations that demonstrate convincingly that they meet all the requirements of the commission are registered.

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Sources: Care Quality Commission, Wikipedia.

About 'AWICS'

'AWICS' is a management consultancy and training company. We specialise in providing support in finance and management to clients in local government and housing in England, Scotland and Wales. We are well known for our ability to analyse and explain complex financial and management issues clearly.

Our mission statement is 'Independence, Integrity, Value'. We therefore provide support to clients from an independent standpoint that is designed to help the client to achieve their objectives. We are passionate about working with the utmost integrity. We believe that we offer the best value for money that is available today!

For more information about our services and us please visit our website at www.awics.co.uk or contact Adrian Waite at Adrian.waite@awics.co.uk. Services that we offer include:

- Management Consultancy – <http://www.awics.co.uk/ManagementConsultancy.asp>
- Interim Management – <http://www.awics.co.uk/interimmanagement.asp>
- Regional Seminars - <https://awics.co.uk/seminars-2020>
- In-House Training - <http://www.awics.co.uk/inHouseCourses.asp>
- Webinars - <http://www.awics.co.uk/webinars.asp>
- Independent Residents' Advice – <http://www.awics.co.uk/IndependentTenantAdvice.asp>
- Technical Books - <http://www.awics.co.uk/publications.asp>
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