

Statutory Notifications for GP Providers

What is a Statutory Notification?



Registered providers and managers of NHS GP and other primary medical services are required to notify CQC about certain incidents, events and changes in their service.

Notifications must be submitted directly to CQC.

Regulations 12, 14, 15, 16, 17, 18, 20, 21 and 22 of the Care Quality Commission (Registration) Regulations 2009 state that services must notify CQC when a service or people using it are affected.

Types of notifications



- Regulation 12 Change to a statement of purpose
- Regulation 14 Absence of and Return of a registered individual of 28 days or more.
- Regulation 15 Changes affecting a provider or manager
- Regulation 18 Abuse or Allegation of abuse concerning a person who uses the service.
- Regulation 18 Events that stop the service from running safely and properly.
- Regulation 18 Incidents reported to or investigated by the police.
- Regulation 18 Serious injury to a person who uses the service.

Types of notifications continued...



- Regulation 16 and 20 Death of a person using the service
- Regulation 21 Death of a registered provider and Personal representative's plans for a service following the death of a registered provider.

- Regulation 17 Death or unauthorised absence of a person using the service who is detained or liable to be detained under the Mental Health Act 1983. – These notifications do not need to be submitted if you are solely a primary medical service provider.
- Regulation 20 Requirements relating to termination of pregnancies. These notification do need to be submitted unless the registered person carries on or management the activity and is not an English NHS Body.

Regulation 15



Changes affecting a provider or manager

Section one should always be completed. Then the following sections that are relevant:

Section	Change
2	Changes of provider for an activity
3	Changes of registered manager for an activity
4	Changes to a registered individual's name
5	Changes to the membership of a partnership
6	Changes to an organisation's name or address
7	The appointment of a new nominated individual
8	Changes to an organisation's officers or directors (NHS bodies should use this section to tell us about new chief executives)
9	Changes of main contact email address and telephone number
10	The appointment of a trustee in bankruptcy, receiver, or liquidator
11	The sequestration of a registered person's estate

Regulation 15 continued



If any of the changes mean that the content of your statement of purpose will also change. You will also need to submit a Statutory Notification for a change to your statement of purpose and provide an updated copy.

If there are any changes to the provider, location or manager, you may also need to submit the relevant registration applications. It is the registered manager's responsibility to submit their removal application before they leave.

The statutory notification only tells us about the change, application forms are required to make the changes happen to ensure the register remains up to date.

If we receive a notification that requires an application and one has not been submitted, either our National Customer Service Centre (NCSC) or your inspector will contact you to make you aware.

What if I don't submit a notification?



Notifications should be submitted as soon possible following the incident, event or change in the service.

It is an criminal offence not to notify CQC which could result in a fixed penalty notice being issued to either the registered provider and/or the registered manager. If payment is not made within 28 days, CQC may prosecute.

Failure to provide an updated statement of purpose (see Regulation 12 of the Care Quality Commission (Registration) Regulations 2009)	Provider Manager	£1,250 £625
Failure to make required notifications (see Regulations 14-18 of the Care Quality Commission (Registration) Regulations 2009)	Provider Manager	£1,250 £625
Failure to observe certain requirements relating to termination of pregnancy (see Regulation 20 of the Care Quality Commission (Registration) Regulations 2009	Provider Manager	£1,250 £625

How to submit a notification



Notifications can be submitted via the Provider Portal

https://services.cqc.org.uk/public/login

Or you can complete a word document and email it to:

HSCA Notifications@cqc.org.uk

The relevant statutory notification form can be found by going to www.cqc.org.uk > Guidance for providers > GPs > Notifications > All notifications. You can then use the search box or scroll through the list.

Use keywords or phrases to filter the full list of notification forms.

What are you looking for?

Apply

Further information: Guidance for providers and managers

Examples



Reg 14 - A registered person (provider or manager) goes on an extended holiday, is unwell, or takes a break or goes on maternity for more than 28 days. Requires notification of absence soon as it becomes apparent it is likely to be more than 28 days. Another notification required when they return.

Reg 18 - There is a power cut, leak/flood, fire that prevents the service from operating as usual. Requires a notification for services being stopped or unable to run safely and properly. A further notification should be sent when resolved.

Reg 18 - There is a theft of equipment, medicines or records. Or an altercation between staff and a patient which was reported to the police. Requires a notification reported to or investigated by the police.

Further examples



R18 - A patient has an accident on the premises and sustained a serious injury. Requires a notification of serious injury. This will also require a RIDDOR completing.

R16 and 20 - Deaths

Reg 16 and 20 - Not all deaths need to be notified but you must do so when;

The death occurred while regulated activity was *actually being provided*. For example, while a patient was actually in consultation with their GP, while at their health centre or surgery, or during a home visit.

OR

• The death occurred within two weeks of regulated activity being provided (as above)

AND

The death was or may have been the result of the regulated activity or how it was provided

AND

In your reasonable opinion, the death could not be attributed to the course which the illness or medical condition would naturally have taken if the deceased had been receiving appropriate care and treatment.

You can also use this notification form to inform us about the involvement of a coroner.

Safeguarding – Regulation 18



Not all referrals the practice makes to the local authority need to be notified to CQC. Practices are only required to notify CQC of safeguarding incidents where the allegation of abuse is linked to their provision of care.

Example 1

Ms A visits Dr B for treatment because of a cut on her cheek and bruising to her eye. She tells Dr B that her partner has hit her.

Is statutory notification to CQC required?

No. It is not alleged that the abuse relates to the doctor carrying on his <u>regulated activity</u>. However, Dr B must follow his practice's normal processes for safeguarding adults and domestic abuse.



Example 2

Ms A visits Dr B for treatment because of a cut on her cheek and bruising to her eye. She tells Dr B that the man working on reception at the surgery hit her.

Is statutory notification to CQC required?

Yes. It is alleged that the abuse relates to one of the doctor's employees and therefore relates to the doctor carrying on his regulated activity.

Example 3

A is a doctor. B comes to him with her child C aged 7 who has a very bad cough. C appears unkempt and is very dirty. On examination of C's chest, A identified bruising on the child's back. A asks B about bruising and receives a response that does not explain the cause. A makes a referral to the local authority safeguarding children's team.

Is statutory notification to CQC required?

No. It is not alleged that the abuse relates to the doctor carrying on his <u>regulated activity</u>. However the doctor must follow his practice's normal processes for safeguarding children.



Example 4

A is a doctor. B comes to him with her child C (a girl, aged 14). B is very upset and tells A that the Practice Manager D has been contacting C by telephone and tried to get C to meet him. He has also written her notes. C did meet D after school on two occasions and the second time he wanted to take her to a hotel.

Is statutory notification to CQC required?

Yes. It is alleged that the abuse relates to one of the doctor's employees and therefore relates to the doctor carrying on his regulated activity.

Appendix 10 within our <u>Safeguarding Handbook</u> has the expectations on statutory notifications of abuse.

Change to a provider's registration



R15- One partner leaves and another is appointed.

Requires a **Notification of change affecting a provider or manager.** With sections one and five completed. Other sections may apply if the partner who left was the registered manager and a new one has been appointed (section two).

- Will also require two applications. One to remove previous partner, one to add the new partner.
- Two further applications might be required if the partner who left was
 the registered manager. Similar to above, an application to remove
 and an application to add a registered manager. If the registered
 manager is still there, then there is no need for section 2 to be
 completed or to submit the registered manager applications.
- Will also required Notification of change to the statement of purpose

Single-handed to a partnership



R15 - Requires a notification to let us know of the change to the provider or manager.

The single-handed provider will to submit an application to deregister at the same time as submitting an application to register a partnership (as it is a different legal entity).

As it is now a partnership, there must also be an application to add a registered manager.

As part of registering the new legal entity, a new statement of purpose must be completed.

There is a standard template on our website for the format and content of a Statement of Purpose.

Branch sites



Branch sites are defined as other premises where the regulated activity(ies) is carried on or managed from.

To be a branch

- It must have the same patient list as the main location.
- It must be stated in the statement of purpose that there is a branch site.

If the patient list is not the same as the main location, then the branch site will need to be registered in its own right as a separate location.

Any questions?





Please note that a project is currently underway to look at notification, therefore the format of the forms may change in the future.

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