



# The difference registration will make









- All health and adult social care providers are meeting a single set of essential standards of quality and safety
- Standards are focused on what is needed to make sure people who use services have a positive experience a direct result of what people said they wanted
- A single regulatory framework across health and adult social care; people receive safe and quality care no matter which part of the care system they experience and where

# Registration timeline





**April 2010** 

#### **NHS Trusts**

333

Oct 2010

Adult social care and independent healthcare providers

**777** 

**April 2011** 

Primary dental care (dental providers) and independent ambulance services

April

2012

Primary medical services (GP practices and out of hours)

# Who needs to apply?



- **1.** The provider: it is the legal entity that provides the service to people that must register as a provider. Individual locations, such as practices within a corporate group, will not register separately. The legal entity can be:
- An individual
- A partnership
- An organisation
- 2. The registered manager: unless the provider is an individual, the provider is required to have in place a registered manager for each location. The manager must be the person who is in day-to-day charge of the delivery of the service for each location, and may be a partner if the provider is a partnership.

# Key phases for dental providers





### The standards



### **Parliament**



Health and Social Care Act 2008

CHAPTER 14

CONTENTS

PART 1

THE CARE QUALITY COMMISSION

CHAPTER 1

- The Care Quality Commission The Commission's functions

- The Commission's objectives
  The Commission's objectives
  Matters to which the Commission must have regard
  Statement on user involvement
  Transfers of property, rights and liabilities
  Meaning of "health and social care services" in Chapter 1

REGISTRATION IN RESPECT OF PROVISION OF HEALTH OR SOCIAL CARE

8 "Regulated activity" 9 "Health or social care"

 $Registration\ of\ persons\ carrying\ on\ regulated\ activities$ 

- 10 Requirement to register as a service provider
- 11 Applications for registration as a service provider 12 Grant or refusal of registration as a service provider

### Dept of Health

**Care Quality** Commission (Registration) **Regulations 2009** 



**Health and Social** Care Act 2008 (Regulated **Activities**) **Regulations 2009** 

#### CQC



Guidance about compliance

#### **Essential standards** of quality and safety



What providers should do to comply with the section 20 regulations of the Health and Social Care Act 2008



# Example of an OUTCOME



**Plain English** 

People focused

**Outcome based** 



Safeguarding people who use services from abuse

#### **OUTCOME 7**

What should people who use services experience?

#### People using the service:

 Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld

# That is because providers who are compliant with the law will:

- Take action to identify and prevent abuse from happening in a service
- Respond appropriately when it is suspected that abuse has occurred or is at risk of occurring
- Ensure that Government and local guidance about safeguarding people from abuse is accessible to all staff and put into practice
- Make sure that the use of restraint in a way that respects dignity and protects human rights, and where possible respects the preferences of people who use services
- Protect others from the negative effect of any behaviour by people who use services

# Quality and Risk Profile (QRP)



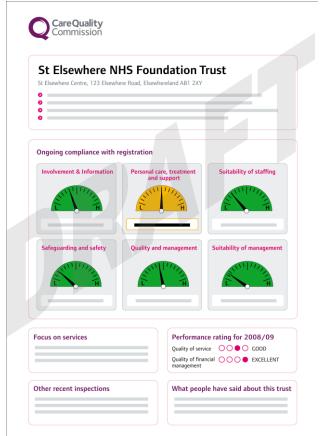
People who use services, families and carers

Other regulatory bodies and Information Centre



Other bodies eg. Ombudsman, commissioners







Staff and other professionals



CQC
Assessors and
Inspectors

### Harmonisation

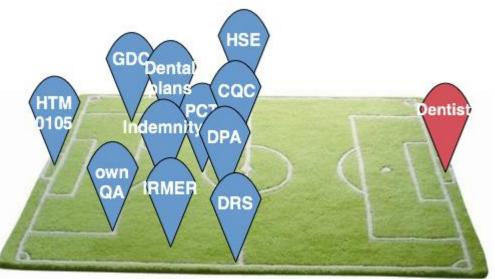


Dentistry is subject to a wide range of checks and inspections

There is a lot of data but also duplication.

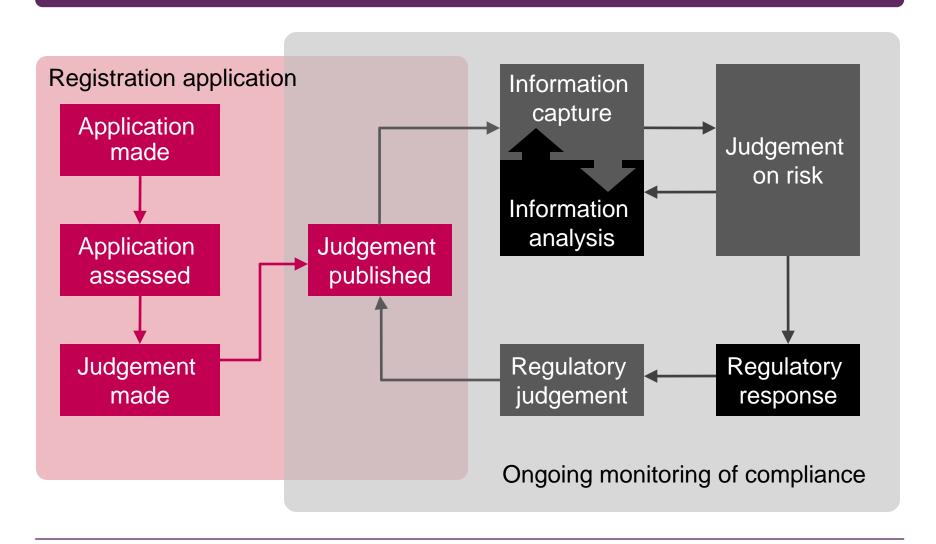
Registration is an opportunity for harmonisation:

- Information sharing
- Re-using findings
- Relying on others
- Coordinating visits and information requests.



# Registration: the cycle





### Reviews of compliance



#### Responsive

#### A **responsive review** of compliance:

- Is triggered when information, or a gap in information raises concern about compliance
- Is not a full check of all core 16 quality and safety outcomes
- Is targeted to the area(s) of concern
- May include a site visit
- All findings will be published

#### **Planned**

#### A **planned review** of compliance:

- Is a scheduled check of all the core 16 quality and safety outcomes
- Will take place at intervals of 3 months, to no less frequent than 2 years
- Will be proportionate, with additional activities focused on gaps on information
- May include a site visit
- All findings will be published

### Fees



- Our principles: Adequacy, fairness, simplicity and evolution
- Primary dental care providers will <u>not</u> incur a cost for initial registration. An annual fee will be applied from April 2011 onwards.
- The interim approaches in place for providers transferring from previous systems, are not a blueprint for the future.
- ▶ Later in 2010, we will consult on a single, long term system of fees to for <u>all</u> providers, including all primary dental care providers

# Objective - at all points of care



People can expect services to meet essential standards of quality, protect their safety and respect their dignity and rights.