



A new system of registration

Guide for providers of primary dental care services



August 2010

About the Care Quality Commission

The Care Quality Commission is the independent regulator of health and adult social care services in England. We also protect the interests of people whose rights are restricted under the Mental Health Act.

Whether services are provided by the NHS, local authorities, private companies or voluntary organisations, we make sure that people get better care. We do this by:

- Driving improvement across health and adult social care.
- Putting people first and championing their rights.
- Acting swiftly to remedy bad practice.
- Gathering and using knowledge and expertise, and working with others.

Introduction

This booklet gives an overview of the new system of registration that applies to all providers of regulated health care and adult social care in England. It describes the main features of the new system and highlights the key dates for primary dental care providers.

The legal background

Under the Health and Social Care Act 2008, primary dental care providers must be registered by the Care Quality Commission from 1 April 2011. This includes NHS and private dentists, and those who work in both sectors.



All adult social care and independent health care providers must be registered from 1 October 2010, and GPs must be registered from April 2012. All NHS trusts were brought into the system on 1 April 2010.

How registration works

Registration is a legal licence to operate. We will register services against new essential standards of quality and safety that will apply across the care sector.

Providers will only need to apply for registration once. After the initial registration application phase, we will continuously monitor whether providers are meeting essential standards as part of a new, more dynamic system of regulation which places the views and experiences of people who use services at its centre.

The new registration system focuses on outcomes – the experiences we expect people to have as a result of the care they receive – rather than primarily on policies and processes. And we want people to have a bigger say in how we judge whether providers are meeting essential standards.

The aim of registration is that people can expect services to meet essential standards of quality, to protect their safety and to respect their dignity and rights wherever care is provided, wherever they live.

Essential standards of quality and safety

To be registered by us, a provider must show that it is meeting essential standards of quality and safety in all of its regulated activities. The standards are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which can be downloaded from www.opsi.gov.uk/si/si2010/uksi_20100781_en_1.

We have produced guidance about what providers must do to meet the essential standards. You can download our publication *Essential standards of quality and safety* from www.cqc.org.uk/registration and you can access an interactive version at www.cqcguidanceaboutcompliance.org.uk.

The guidance is focused on outcomes and relates to important aspects of care such as respecting and involving people who use services, care and welfare of people who use services and management of medicines. The outcomes are grouped into six main headings:

- Involvement and information
- Personalised care, treatment and support
- Safeguarding and safety
- Suitability of staffing
- Quality and management
- Suitability of management.

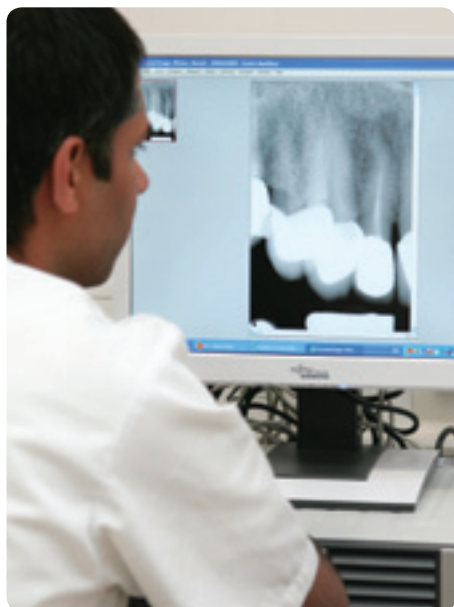
Providers that need to register

It is the service 'provider' who must register with us. A provider may be an individual, a partnership, or an organisation – such as a company, a charity, an NHS trust or a local authority.

Individual practices are not required to be registered in addition to the provider. A provider may be registered to provide regulated activities from more than one location (or practice).

Where a provider is a subsidiary of a larger corporate group, it needs to be registered as a provider in its own right if it is the legal entity responsible for the regulated activity.

Where a provider allows other dental professionals to see patients as part of the practice (for example, associates), they will be regarded in the same way as employees and are not required to register.



For full details on the types of providers that need to be registered, please see our document *The scope of registration*, available at www.cqc.org.uk/registration.

Registered manager

Where the provider is an organisation or a partnership, the person responsible for the day-to-day running of the service must also register with us as a 'registered manager'.

Where the provider is an individual but he or she is not in day-to-day charge of the service, the person who is in day-to-day charge must also register with us as a registered manager.

Activities that must be registered

It is the responsibility of each provider to ensure that it is correctly registered with us. A provider must register for each of the regulated activities it provides, rather than for each of its individual services, and it is common to need to register for more than one.

Those activities that are most likely to apply to dentists are:

- **Treatment of disease, disorder or injury,**
- **Surgical procedures, and**
- **Diagnostic and screening procedures.**

The full list of regulated activities is:

- Personal care
- Accommodation for people who require nursing or personal care
- Accommodation for people who require treatment for substance misuse
- Accommodation and nursing or personal care in the further education sector
- 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
- Maternity and midwifery services
- Termination of pregnancies
- Services in slimming clinics
- Nursing care
- Family planning services.



For details of all the regulated activities, please see our document *The scope of registration*, available at www.cqc.org.uk/registration. The list of regulated activities is approved by Parliament and it is likely to be amended and updated from time to time.

Application timetable

Primary dental care providers must be registered with us from 1 April 2011. The general timetable is set out below, but to receive the very latest updates on registration, you can sign up for our e-bulletin for health care and social care professionals at www.cqc.org.uk.newsandevents.newsletter.cfm.

- **Preparing for registration**
(August – October 2010)

We will publish the key forms and guidance that you will need. We will work with providers to make sure they know how to register.

In **August**, we will publish detailed information about what you will need to do to submit your application for registration.

During **September and October**, we will publish the full application toolkit on our website. We will also hold a series of workshops (face to face and online) to take you step-by-step through the application process.

- **Applying for registration**
(November 2010 – March 2011)

Primary dental care providers will register between November 2010 and March 2011. There will be a series of allocated 'windows' in which providers can apply. We will write to providers and publish further

information, but it is your responsibility to ensure that you register within this period.

We will review the applications, comparing them against other data we hold, talk to providers about their applications and carry out site visits where necessary. We will make a decision about each application and register providers accordingly.

- **Registration goes live**
(April 2011 onwards)

We will publish a register of the registration status of all providers of primary dental care on 1 April 2011.

Where we have evidence that a provider is not meeting the standards, we may register it with conditions. Compliance conditions are a tough test which demand a clear action plan to improve and timescales in place to get it right. These conditions may be removed following improvement, or replaced by further swift, proportionate enforcement action. Other conditions may restrict the services a provider can offer at a particular location.

After registering a provider, we will constantly check and monitor whether its services continue to meet essential standards of quality and safety. We will focus on areas where we think there is a risk of standards not being met.

Registration fees: There is no 'joining' fee for providers that apply for registration before 1 April 2011. However, providers will be required to pay an annual registration fee once they are registered.

Around late October, we will consult on our proposals for the registration fees that will take effect for all providers from April 2011, and all providers will have an opportunity to comment.



Making changes to your registration: Once you have been registered by us, you will **not** need to re-apply on an annual basis. However, if you want to change your registration in the future, you will need to apply to us to make the change.

Information returns: You will not be required to send routine additional information returns after registration. But we will expect you to have information available from your own internal monitoring and quality assurance systems, if we ask to see it. We will publish templates on our website to help you maintain such information and keep it up to date.

We will require you to notify us of significant events if and when they happen, such as changes in your premises, or serious safety incidents arising from treatment.

New providers: Any new provider who intends to start providing a dental service on or after 1 April 2011 must be registered by us before doing so.

Demonstrating compliance with the new standards

Guidance for providers

To be registered, providers must show that they are meeting the new essential standards of quality and safety for each regulated activity they provide in each location.

Our guidance about compliance with the regulations makes it clear what providers need to do to comply with the standards. You can download our publications *Essential standards of quality and safety* and *Judgement framework* from www.cqc.org.uk/registration and you can access an interactive version of the *Essential standards* guidance at www.cqcguidanceaboutcompliance.org.uk.

In the guidance, we have focused primarily on outcomes – the experience people have as a result of the care they receive – rather than on the policies, systems and processes used to deliver care.

Our guidance about compliance has a legal status. Registered providers are required to “have regard to” the guidance for the purposes of demonstrating compliance. They must take it into account when considering their own compliance. The guidance is also admissible as evidence in criminal or civil proceedings.

Our assessors and inspectors use our guidance about compliance to decide whether:

- We should register a provider.
- A provider that is already registered can continue to keep its registration.
- Any concerns about the provider should lead to them being required to make improvements.
- We need to use our more formal powers to bring about improvement, including restricting, suspending, or in the most serious cases, removing a provider's registration.

Cleanliness and infection control

The essential standards of quality and safety include cleanliness and infection control, including decontamination. The Department of Health issues the guidance about compliance with this particular regulation (the *Code of Practice for health and adult*

social care on the prevention and control of healthcare associated infections and related guidance).

You will need to refer to it when deciding whether you are compliant – go to www.dh.gov.uk to download a copy.



Involving people who use services

Where available to us, the views and experiences of people who use services will inform our decision about whether a provider meets the essential standards of quality and safety. We receive this information through groups that represent people who use services, including local involvement networks (LINks), overview and scrutiny committees, and other local voluntary groups.

Monitoring compliance

A provider's registration is the first step in the new regulatory system. Our focus then shifts to monitoring the provider's services to make sure that they continue to meet the essential standards of quality and safety. If a provider falls below the standards, we work with them to ensure that they return to compliance as quickly as possible. If a provider fails to improve, we take swift action to protect people who use the service, using our legal powers if necessary.

Although registration is held by the provider, we monitor their compliance with the essential standards, including carrying out and reporting on inspection, at the practice level.

We will use different methods for different providers, depending on the regulated activities they provide and the information that is available to us about their activities and performance. However, our judgements about compliance will be consistent across different provider types and sectors. We will hold a 'quality and risk profile' (QRP) for each registered provider that contains all the information that we have about the provider that is relevant to its compliance, including:

Notifications: These are incidents that providers must tell us about by law. They include deaths, serious injury, allegations of abuse and so on. A full list can be found in the *Essential standards*.

Other information from providers: Providers can carry out a 'provider compliance assessment', using a template that we provide, to check themselves against the regulations. We may ask providers to submit all or part of a provider compliance assessment so that we can see what they are doing to comply with the regulations and to ensure that they are going to sustain their performance.

Information from partner organisations: We are developing information-sharing agreements with a range of other regulators and organisations. To help reduce any unnecessary burden on providers, wherever

possible we will not ask you to send us information that you have already provided to another agency.

When we use information from partner organisations, we use it in the format in which they collected it and align our approach with existing systems. For example, we will use information about providers that NHS Dental Services collect, and work with them and others to harmonise information collection and inspection activity.



Information from people who use services:

We invite feedback from groups representing people who use services, their families and carers. We will also draw on information from the Parliamentary and Health Service Ombudsman and other independent adjudicators about complaints.

In addition, our teams gather local intelligence about the views and experiences of people using services, including through site visits and interviews with people. We talk to groups who represent them, through local involvement networks (LINKs), charities and voluntary organisations.

We also receive feedback directly from people who use services and members of the public.

Analysing risk of non-compliance

We are responsive in the way we regulate. We use information as we get it, making close to real-time decisions and taking action quickly where we need to.

Our local assessors and inspectors will regularly review local providers' QRPs and will be alerted when new information is added. If they have concerns that a provider has fallen below one or more of the essential standards, they make a judgement using our guidance about compliance, our judgement framework and the Department of Health's *Code of Practice for health and adult social care on the prevention and control of healthcare associated infections and related guidance*. Depending on this judgment, they may make further enquiries to the provider or partner organisations and carry out an inspection.

If the provider recognises their non-compliance and is already taking steps to address the problem, and there is no immediate risk to the safety of the people using the service, then we will be proportionate in our response. If we have confidence in a provider's ability to make the improvements needed, we will not automatically take enforcement action.

Reviews of compliance

In addition to reviewing a provider's compliance in response to specific information about them, we review all registered providers' compliance with a core set of the essential standards at least once every two years. The exact frequency of these planned reviews depends on the type of services the provider offers, the people who use them and the amount of information we routinely receive from the provider.

Assessing dental services

When assessing dental services, we will not be looking at the performance of individual clinicians. Our inspectors' area of expertise is to check that the service as a whole is run and managed in a way that meets the essential standards of quality and safety. However, we will be working closely with NHS Dental Services, so that their dental reference officers and professional clinical advisors can inform our approach. We will also be using the findings of others who visit dental practices – such as dental practice advisors – to make sure that we benefit from their expertise.

Online information about care providers

We publish up-to-date information from all of our assessments on our website, to help the public make informed choices about health care and social care services. It includes a list of all of the providers who are registered with us, and information supporting our decisions about each one's registration status.

A provider's registration details do not include a rating, because our decision to register them is not made on the basis of performance against best practice standards or aspirational levels of performance. It is based on compliance with essential standards of quality and safety that all providers must meet under the Health and Social Care Act 2008.

Taking enforcement action

The Health and Social Care Act 2008 gives CQC a range of enforcement powers that enable us to take swift, targeted action where services are failing the people who use them. They include warning notices, imposition or variation of conditions of registration, suspension of registration to provide certain services, fines and prosecution. As a last resort we could cancel a provider's registration, which would make it illegal for them to operate.

The action we decide to take will depend on the level of concern we have about the provider's non-compliance with the essential standards of quality and safety and our confidence in the provider's ability to take action. If the necessary changes and improvements are not made, the concern will be escalated.

When we use, or are considering using, our enforcement powers, we always liaise with the relevant primary care trust, so that they can support NHS providers over improvement. We also coordinate with the General Dental Council, where appropriate, to avoid any overlap in our actions. Our overall objective as regulator is to encourage improvement in the care people receive, and we use our enforcement powers as part of our work to achieve this.

© Care Quality Commission 2010

Published August 2010

This document may be reproduced in whole or in part in any format or medium for non-commercial purposes, provided that it is reproduced accurately and not used in a derogatory manner or in a misleading context. The source should be acknowledged, by showing the document title and © Care Quality Commission 2010.

ISBN: 978-1-84562-271-8

Need help?

If you have any questions about registration or you need more information, you can:

- Look at our website:
www.cqc.org.uk/registration.
- Call our National Contact Centre on **03000 616161**.
- Email us at **enquiries@cqc.org.uk**.
- Write to us at:
**Care Quality Commission
National Correspondence
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA.**

Please contact us if you would like a summary of this publication in other formats or languages.

Registered office:
Care Quality Commission
Finsbury Tower
103–105 Bunhill Row
London
EC1Y 8TG

CQC-148-10000-STE-082010



Corporate member of
Plan English Campaign
Committed to Greater Communication

459