



Title
CQC Compliance and Statutory Notifications Policy and Procedure
Principle
Homekare Community Services Ltd is committed to full compliance with its obligations as a CQC-registered Community care provider. This includes the timely and accurate submission of all statutory notifications to the Care Quality Commission (CQC) and to all other relevant bodies, in accordance with the Health and Social Care Act 2008, the CQC (Registration) Regulations 2009, the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and all related legislation. We recognise that statutory notifications are not merely an administrative function — they are a fundamental expression of our accountability as a provider, our commitment to transparent governance, and our duty to protect the safety and wellbeing of the people we support. Every notification is an opportunity to demonstrate that Homekare Community Services Ltd operates openly, honestly, and in accordance with the Duty of Candour.
Objectives
This policy and procedure set out: • The legal duty to notify CQC and other relevant bodies of specified changes, events, and incidents • The categories of notifiable events applicable to Homekare Community Services Ltd • The timescales within which notifications must be made • The process for making notifications, including roles, responsibilities, and methods • The parallel notification requirements to other bodies (NSAB MASH, HSE, police) • The requirements for maintaining a notifications log and learning from notifiable events • Team member's training requirements in relation to notifications compliance
Scope
This policy applies to all regulated activities carried out by Homekare Community Services Ltd, specifically the regulated activity of Personal Care as registered with

the CQC. It covers all incidents, events, and changes that occur in connection with the delivery of care and support to service users in Worksop and the surrounding Nottinghamshire area.

This policy and procedure apply to all Homekare Community Services Ltd team members, including Care Team, Senior Team, Care Manager(s), the Registered Manager, HR and Compliance Lead, and the Director/Nominated Individual.

Responsibilities

Director / Nominated Individual

- Receives and reviews quarterly notifications summary from the Registered Manager
- Has delegated authority to submit notifications of changes to the provider's registration (e.g. name, address, insolvency)
- Must be notified immediately by the Registered Manager when any serious incident requiring CQC notification occurs
- Accountable for the overall governance framework that ensures compliance with notification obligations

Registered Manager

- Has primary responsibility for all statutory notifications on behalf of the provider
- Maintains the Notifications Register and ensures all notifications are submitted within required timescales
- Ensures a named deputy is identified and trained to make notifications in their absence (on-call arrangements)
- Reviews all notifications for learning and presents a quarterly summary to the Director/Nominated Individual
- Ensures team training on notification procedures is current and evidenced
- Liaises with NSAB MASH and other partner agencies as required

HR & Compliance Officer

- Supports the Registered Manager in maintaining the Notifications Register
- Supports completion of notification forms and record-keeping
- Monitors the notifications log as part of the quality assurance cycle
- Supports team training on notification procedures

Senior Care Team and Care Manager

- Must recognise when a notifiable event may have occurred and report immediately to the Registered Manager or on-call
- Must complete an Incident/Accident Report Form at the time of any incident
- Must not delay reporting a potential notifiable event while awaiting further information — initial notification can be supplemented later

Care Team

- Must report any incident, accident, safeguarding concern or change in client's condition to the Senior Care Team or Care Manager immediately during or after a care visit
- Must complete contemporaneous written records at the time of any incident during a care visit

- Must never attempt to suppress, minimise or delay reporting an incident for any reason

Procedure

1. Categories of Statutory Notifications to CQC

The following table sets out the complete list of events that must be notified to the CQC by Homekare Community Services Ltd as a registered community care provider. It is an offence under Section 64 of the Health and Social Care Act 2008 not to notify CQC when a relevant event has occurred.

1.1 Notifications Relating to Client's

1.2

Notification Type	Regulation	Timescale	Who Notifies	Method
Death of a service user	CQC Reg 16	Without delay (same day)	Registered Manager	CQC Provider Portal (SN16)
Serious injury to a service user	CQC Reg 18	Without delay (same day)	Registered Manager	CQC Provider Portal (SN18)
Allegation of abuse / safeguarding concern	CQC Reg 18	Without delay (same day)	Registered Manager	CQC Portal (SN18) + NSAB MASH
Events stopping service running safely	CQC Reg 18	Without delay (same day)	Registered Manager	CQC Provider Portal (SN18)
Police involvement in an incident	CQC Reg 18	Without delay (same day)	Registered Manager	CQC Provider Portal (SN18)
DoLS application and outcome	CQC Reg 18	Once outcome known	Registered Manager	CQC Portal (SN18) or Word form
Children in adult service settings	CQC Reg 18	Without delay	Registered Manager	CQC Provider Portal (SN18)
Death of detained MH patient	CQC Reg 17	Without delay	Registered Manager	Specific CQC Word form (named)
Absence of detained MH patient	CQC Reg 17	Without delay	Registered Manager	Specific CQC Word form

1.2 Notifications Relating to the Registration and Business

Notification Type	Regulation	Timescale	Who Notifies	Method
Change of Registered Manager	CQC Reg 14	28 days in advance	Director/NI	CQC Provider Portal — registration
Change of Nominated Individual	CQC Reg 14	Without delay	Director/NI	CQC Provider Portal — registration
Changes to Statement of Purpose	CQC Reg 12	28 days in advance	Director/NI or RM	CQC Provider Portal — registration
Change of provider name or address	CQC Reg 13	28 days in advance	Director/NI	CQC Provider Portal — registration
Provider stopping regulated activities	CQC Reg 11	28 days in advance	Director/NI	CQC Provider Portal — registration
Insolvency / liquidator appointment	CQC Reg 15	Without delay	Director/NI	CQC Portal — financial change
Absence of registered individual (28+ days)	CQC Reg 17	Without delay	Director/NI	Word form to CQC
Contact details change	CQC guidance	As soon as possible	Director/NI or RM	CQC Provider Portal

IMPORTANT — MEDICINES ERRORS

Medicines errors are NOT automatically notifiable to CQC unless the error: (a) causes significant harm to the client; (b) constitutes or may constitute abuse (Reg 13); or (c) triggers the Duty of Candour (Reg 20 — a notifiable safety incident). All medicines errors must be reported internally under the Medicines Management Policy and reviewed for whether CQC notification is required. In all cases, if abuse is suspected, NSAB MASH must also be contacted.

2. Parallel Notification Requirements

A single incident may trigger notification obligations to multiple bodies simultaneously. CQC notification does NOT satisfy obligations to other bodies, and notifications to other bodies do NOT satisfy the CQC notification duty. All applicable pathways must be followed concurrently.

Incident Type	CQC Notify	NSAB MASH	HSE RIDDOR	Duty of Candour
Death during care visit	Required (same day)	If concerns/abuse	Assess if work-related	Required if care-related
Serious fall causing fracture	Required (same day)	If neglect suspected	Required if work-related	Required
Allegation of staff abuse	Required (same day)	Required (same day)	Not applicable	Required
Deliberate medicine withholding	Required — abuse (same day)	Required (same day)	Not applicable	Required
Staff serious injury at work	Not usually	Not usually	Required (RIDDOR)	Not applicable
Service disruption (fire/flood etc)	Required (same day)	Not applicable	If injury caused	If person affected
Change of Registered Manager	Required (28 days)	Not applicable	Not applicable	Not applicable
DoLS application / outcome	Required (on outcome)	Not applicable	Not applicable	Not applicable
Police involvement in incident	Required (same day)	Assess safeguarding	If injury caused	Depends on circumstances

3. Nottinghamshire Safeguarding Adults Board (NSAB) Referral Pathway

CRITICAL — NOTTINGHAMSHIRE COUNTY COUNCIL	
Homekare Community Services Ltd is based in Blyth, Nottinghamshire. All safeguarding referrals must be directed to Nottinghamshire County Council MASH — NOT Nottingham City Council. These are distinct local authorities with separate safeguarding structures.	
MASH — Office Hours	0300 500 8080 (Monday to Friday, 9am–5pm)
MASH — Emergency Out of Hours	0300 456 4546
Police (emergency)	999

Police (non-urgent)	101
NSAB Website	https://nsab.nottinghamshire.gov.uk
Referral method	Telephone first, followed by written referral confirmation using the NCC safeguarding referral form within 24 hours

When making a safeguarding referral to NSAB MASH, the Registered Manager must simultaneously submit a CQC statutory notification. The MASH referral does not satisfy the CQC obligation.

3.1 Multi-Agency Safeguarding Obligations

- Where a safeguarding enquiry (Section 42 Care Act 2014) is opened by Nottinghamshire County Council, the Registered Manager must cooperate fully with the enquiry
- Where a Safeguarding Adults Review (SAR) is commissioned by the NSAB, Homecare Community Services Ltd must provide all requested documentation and attend relevant meetings
- The principle of Making Safeguarding Personal (MSP) means the client (where capacity allows) must be kept informed and involved in all safeguarding processes
- The Registered Manager must maintain a confidential record of all safeguarding referrals, MASH notifications, and outcomes, cross-referenced with the Notifications Register

4. RIDDOR Reporting — Health and Safety Executive

Homecare Community Services Ltd has a legal duty under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) to report specified workplace incidents to the Health and Safety Executive (HSE). This is separate from and additional to CQC notification obligations.

4.1 What Must Be Reported to HSE Under RIDDOR

- Work-related deaths of employees — report immediately by fastest means, then in writing within 10 days
- Specified injuries — fractures (excluding finger/toe), amputations, crush injuries, loss of consciousness, spinal injuries, or any injury requiring more than 24-hour hospitalisation — report within 10 days
- Over-7-day incapacitation — where an employee cannot perform their normal work duties for more than 7 consecutive days following a work-related incident — report within 15 days
- Dangerous occurrences — fires, explosions, structural collapses, equipment failure — report without delay
- Injuries to non-employees (service users or members of the public) — only reportable if the person is taken directly to hospital for treatment (not merely as a precaution) and the injury arose from a work activity

4.2 Common RIDDOR Scenarios in Community Care

- Team member sustaining a back injury from manual handling during a care visit
- Team member involved in a road traffic accident while travelling between care visits (if work-related)
- A client sustaining a serious fall where the care activity contributed to the fall
- Sharps injury to a team member
- Team member assaulted by a client causing specified injury

RIDDOR reports must be submitted to HSE online at www.hse.gov.uk/riddor. A copy of each RIDDOR report must be retained in the organisation's records and cross-referenced in the Notifications Register.

5. Procedure — Making a Statutory Notification to CQC

Step 1 — Recognise the Notifiable Event

Any team member who identifies or becomes aware of a potential notifiable event must immediately report this to their line manager. The Registered Manager (or on-call/ out of hours) will determine whether the event meets the threshold for statutory notification. If in doubt, the decision should always be to notify — CQC have stated they would rather receive a notification that proves unnecessary than miss a reportable event.

Step 2 — Immediate Response Actions

- Ensure the safety and wellbeing of the client and any other persons affected
- Contact emergency services (999) if any person is at immediate risk or requires urgent medical attention
- Inform the client (and where appropriate their family/representative) of what has happened, in line with the Duty of Candour Policy
- Secure the scene and preserve evidence where a potential crime or serious incident has occurred
- Complete an Incident/Accident Report Form as soon as possible while the facts are fresh
- Notify the Registered Manager (or on-call) immediately by telephone — do not delay notification waiting to complete paperwork

Step 3 — Registered Manager Assessment

The Registered Manager will:

- Determine which notification categories apply
- Determine whether parallel notifications are required (NSAB MASH, HSE RIDDOR)
- Contact the Director/Nominated Individual immediately where a death, serious injury, or allegation of abuse has occurred
- Make the CQC notification — use the CQC Provider Portal at <https://provider.cqc.org.uk> for all SN16 and SN18 notifications. For registration changes, use the registration section of the Provider Portal

- Record the notification in the Notifications Register including the date/time of submission and any CQC reference number

Step 4 — Making the CQC Notification

When completing a notification on the CQC Provider Portal:

- Use the client's unique identifier or reference code — do not use their name (except in the case of death of a detained mental health patient, where the name and date of birth are required)
- Include all factual information requested by the form — be accurate and concise
- Note that CQC forms ask about the client's protected characteristics under the Equality Act 2010 — complete these fields as fully as possible
- For events requiring a telephone call to CQC first (deaths and serious events), call CQC's national customer service centre at 03000 616161, then follow up with a written notification via the portal
- Retain a copy of the completed notification form and any email/portal confirmation

Step 5 — Post-Notification Actions

- Ensure the Duty of Candour obligations have been fulfilled — the client and/or their representative must be informed and supported in accordance with the Duty of Candour Policy
- Review the incident to identify any immediate risk management actions required (update risk assessment, care plan, or team guidance)
- Review any medicine involvement against NICE NG67 requirements and the Medicines Management Policy
- Brief the team (without breaching confidentiality) where there are learning points for other team members
- Record any actions taken and learning identified in the Notifications Register

6. Notifications Register

The Registered Manager must maintain a Notifications Register containing a record of every statutory notification made by Homekare Community Services Ltd. The register must contain the following minimum information for each entry:

Date and time of incident	Exact date and time the notifiable event occurred
Date and time of notification	Exact date and time notification was submitted to CQC
Notification type	Category of notification (e.g. death, serious injury, abuse allegation, registration change)
CQC reference number	Reference number issued by CQC portal or customer service team

Who made the notification	Name and role of the staff member who submitted the notification
Parallel notifications	Note whether NSAB MASH, HSE RIDDOR, police and/or Duty of Candour actions were also triggered
Outcome / CQC response	Any follow-up communication from CQC; outcome of investigation where applicable
Learning actions	Any changes to policy, procedure, risk assessment, training, or care plan arising from the event
Review date	Date the learning actions were reviewed for effectiveness

The Notifications Register is a confidential governance document. It must always be available for inspection by CQC and must be presented at the quarterly Quality Governance Meeting

7. Duty of Candour — Connection to Notifications

Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 requires Homekare Community Services Ltd to be open and transparent with client's and their representatives when a 'notifiable safety incident' occurs. This obligation runs in parallel with — but is separate from — the duty to notify CQC.

A notifiable safety incident in community care includes any unintended or unexpected incident that results in, or could result in, the death of the client or significant harm requiring treatment by a healthcare professional.

7.1 Duty of Candour Steps

- As soon as practicable after the incident is identified, inform the client (or their representative) that it has occurred
- Provide a truthful account of what happened, in plain language, with empathy
- Offer a sincere apology — this is not an admission of legal liability
- Advise the client of any further enquiries to be conducted and keep them informed of outcomes
- Provide a written record of the notification to the client including a summary of the incident, the apology, and any actions taken
- Record all of the above in the client's care record and in the Notifications Register

Team members who have failed to follow the Duty of Candour will be managed through the Disciplinary, Grievance and Appeals Policy. Deliberate concealment of a notifiable safety incident is a serious disciplinary offence and a potential criminal matter.

8. Out-of-Hours Notifications

Notifiable events do not only occur during office hours. The Registered Manager must ensure that out-of-hours (on-call) arrangements include a clear notification protocol.

- The on-call must have access to this policy, and the Notifications Register at all times
- The on-call has delegated authority to make CQC notifications out of hours where the timescale is 'without delay' — notification must not wait until the next working day for serious incidents
- The on-call must contact the Registered Manager and Director/Nominated Individual immediately on receipt of a serious incident report (death, serious injury, safeguarding allegation)
- All out-of-hours notifications must be recorded in the On-Call Handover Record and transferred to the Notifications Register on the next working day
- The CQC Provider Portal is accessible 24/7. For urgent notifications requiring telephone contact first, CQC's national customer service number is 03000 616161

9. Data Protection and Confidentiality

All notifications must be made in compliance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. The following requirements apply:

- Client's must be identified using a unique identifier or reference code in all CQC notifications — their name must not be used unless specifically required by the notification form (as in the case of death of a detained mental health patient)
- Notification forms and correspondence with CQC must be stored securely, with access restricted to authorised staff on a need-to-know basis
- Information submitted to NSAB MASH must be the minimum necessary to fulfil the safeguarding duty, consistent with the principles of the Confidentiality Policy
- Where the Duty of Candour requires disclosure to the service user or their representative, this should be done in person and/or in writing — information should not be shared by telephone unless absolutely necessary
- Clients have rights under UK GDPR including the right of access to information held about them — this includes information relating to incidents concerning them, subject to any lawful exemptions

10. Learning from Notifications

Homekare Community Services Ltd is committed to a culture of continuous improvement. Every statutory notification represents an opportunity to learn and improve the quality and safety of the service. The following processes ensure learning is embedded:

- Every notifiable event triggers an internal review by the Registered Manager within 5 working days of the CQC notification
- The review considers: Was this incident preventable? What systemic factors contributed? What changes are required to policy, procedure, risk assessment, training, or care delivery?
- Findings and actions from the review must be recorded in the Notifications Register
- Where a pattern of similar incidents is identified, the Registered Manager will conduct a thematic review and report findings to the Quality Governance Meeting
- All learning from notifications is incorporated into team supervision, team meetings, and training as appropriate, in accordance with the Continuous Quality Improvement Policy
- The quarterly Quality Assurance Report includes a summary of notifications, themes, and learning actions for the period
- Where a Safeguarding Adults Review (SAR) is commissioned by the NSAB, the Registered Manager will actively participate and implement any recommendations

11. Training Requirements

All team members must receive training on this policy as part of their induction and annual refresher training. Training requirements by role are:

Care Team	Induction training: Care Certificate Standard 3 (Duty of Care) and Standard 14 (Handling Information). Must be able to recognise potential notifiable events and know the escalation pathway.
Senior Team	As above plus: understanding of notification categories, Duty of Candour obligations, and parallel safeguarding referral requirements. NSAB Level 1–2 safeguarding competency.
Care Manager	As above plus: ability to support the Registered Manager in completing notifications; understanding of the Notifications Register. NSAB Level 2 safeguarding competency.
Registered Manager	Complete training on CQC notification requirements (Skills for Care / High Speed Training). NSAB Level 3 safeguarding competency. Oliver McGowan Mandatory Training (Tier 2 — in force September 2025). Annual refresher.
HR & Compliance Lead	Training on notification record-keeping, UK GDPR obligations in notification data, and audit of the Notifications Register.
Director / Nominated Individual	Governance-level understanding of notification obligations and fitness to operate requirements under Regulation 19.

Training records must be maintained in the Team Training Record (linked to the Workforce Training Plan and Mandatory Training Matrix). Evidence of training must be available for CQC inspection.

12. Monitoring and Compliance

Compliance with this policy is monitored through the following mechanisms:

- Monthly review of the Notifications Register by the Registered Manager to verify timescales were met and learning actions completed
- Quarterly audit of notification compliance as part of the Quality Assurance cycle , including spot-checks of incidents to confirm all notifiable events were identified and notified
- Annual review of this policy incorporating any changes to CQC guidance, legislation, or NSAB procedures
- Team member's survey and supervision monitoring to assess knowledge of notification requirements
- CQC inspection readiness checks — the Notifications Register must be kept up to date and be immediately available for inspection

13. Consequences of Non-Compliance

LEGAL NOTICE

Failure to notify CQC of a notifiable event is a criminal offence under Section 64 of the health and Social Care Act 2008. The consequences include: Regulatory action (warning notice, conditions on registration, suspension or cancellation of registration); criminal prosecution; fines of up to £20,000.00; and referral to safeguarding authorities. Team members who knowingly fail to notify, or who obstruct the notification process, may face disciplinary action including dismissal and referral to the DBS.

14. Policy Review

This policy will be reviewed annually, or sooner in the event of:

- Any change to CQC guidance, regulations, or notification procedures
- Any change to NSAB procedures or local safeguarding thresholds
- Any change to RIDDOR or other relevant health and safety legislation
- A significant learning event arising from a notification or inspection finding
- Feedback from team member's, client's, or external agencies indicating that the policy needs updating

Linked Legislation and Guidance

CQC (Registration) Regulations 2009 — Regs 11–22

Primary notification obligations for registered providers: specified events, timescales, and required information

Health and Social Care Act 2008 — Section 64

Criminal offence to fail to meet registration obligations including notifications. Penalties up to £20,000 and prosecution

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014	Reg 12 (safe care), Reg 13 (safeguarding), Reg 17 (governance), Reg 18 (incidents), Reg 20 (duty of candour)
Mental Capacity Act 2005	DoLS applications and outcomes must be notified to CQC
Care Act 2014 — Section 43	Nottinghamshire Safeguarding Adults Board (NSAB) statutory duty; safeguarding referral obligations
RIDDOR 2013	Employer duty to report workplace injuries, diseases and dangerous occurrences to HSE
UK GDPR / Data Protection Act 2018	Pseudonymisation of service users in notifications; lawful processing basis for notification data
Equality Act 2010	CQC notifications ask about protected characteristics; discrimination is a safeguarding category
NICE NG67	Medicines reporting requirements including notification triggers for significant errors
NICE NG97	Decision-making and mental capacity — DoLS notification framework
NSAB Strategic Plan 2025–2028	Local safeguarding priorities and referral pathways for Nottinghamshire providers

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References and Appendices			
• Appendix A: • Appendix B: • Appendix C:			