Richard Banyard walks GPs and practice managers month-by-month through the steps and deadlines they should take to prepare

By April 2013, all English GP practices will need to have registered with the CQC.

The key messages in preparing for the CQC are:

• Start early.

• Recognise that this is a progressive process – and it is about much more than just filling in the registration form in the autumn and then forgetting about it.

• Focus on the six key risk areas of non-compliance. Know what they are – for GPs, these are medicines management, staffing, records management, safeguarding, confidentiality and information control – and have clear action plans in place as necessary to deal with them.

• If in doubt, don't be afraid to ask the CQC for advice.
Below is a month-by-month timeline to help your practice prepare.

**Before July 2012**

By now, you should have made sure that the practice is properly legally constituted. Partnerships, for example, will need to make sure that the partnership agreement is up to date, as the CQC can only register a practice if it legally exists.

Lead management responsibilities also need to be sorted out. A crucial step will be to decide who the registered manager or managers will be, as this is the person who will be accountable in law for the services being operated. At least one GP partner will need to take the lead for CQC issues; it cannot all be left to the practice manager to sort out.

Key players in the practice will also need to have begun to learn more about the CQC itself and its powers. By now, practices should have started the process of assessing their compliance against the 250+ CQC standards. Don't underestimate how long this process might take. Some of the standards only apply to certain providers, so as an initial step practices will need to determine which ‘service types’ are offered before starting to assess compliance. The key to CQC compliance is working out where any key risks lie for patients and staff.

If you have a spare moment, make sure that your key policies – such as complaints, safeguarding procedures and patient information leaflets – are up to date in order to save time later in the year.

**July 2012**

Formal processes begin. The CQC will contact all practices to sort out the 28-day window during the autumn for each practice’s registration application.

Look out for the CQC application form. This will be available online, so can be completed incrementally. Practices need to identify the questions that might cause the most difficulties, and then focus on these during the lead-up period to completing the application itself. Make sure that CQC issues appear regularly on practice meeting agendas throughout the application period.

Another important issue to decide early on is which ‘locations’ your practice is operating. For most practices, this will be straightforward – but if a practice is operating from more than one surgery or has a branch, you will have to decide whether separate applications are also needed.

By July, you will also need to decide which are the ‘regulated activities’ for which you will be seeking CQC registration. These are likely to be ‘treatment of disease, disorder and injury’ and ‘diagnostic and screening procedures’. However, there are another 13 possible activities that are all to be registered with the CQC, so you will need to work through them just to check whether you also need to apply for these. For a full list, go to pulsetoday.co.uk/gp-regulation-cqc.

Finally, be absolutely clear about who will need to have a Criminal Records Bureau (CRB) check. GPs with current GMC registration should be exempt from this, but others – for example, non-clinicians in the partnership and non-medical registered managers – are almost certain to need enhanced checks.
This process needs to be started as early as possible. Most other staff in the practice may also need to have been CRB checked, especially those who work single-handed with patients and children.

**September 2012**

From September, practices will begin submitting applications. Allow time for the application to be fully signed by all the partners, and also fully checked through before submission. If it is incomplete, it will just arrive back from the CQC in your in-tray.

It is important that you prepare an action plan for any areas you have assessed as being non-compliant or only partly compliant with the CQC standards. It is far better to have a remedial action plan in place than to feign compliance and be caught out later.

**December 2012**

This is the latest deadline for CQC applications to be submitted. If there are subsequent queries from the CQC, make sure that these are answered promptly and accurately in order to ensure your application is not delayed.

In addition, as soon as your application has gone in, there will be other CQC-related tasks to consider such as training and budgeting for the costs of compliance and registration. It will also be prudent to start working up the internal practice procedures that you will need to follow once registration commences. For example, any deaths or untoward incidents in the practice will need to be notified to the CQC from April.

A key member of the practice team and a deputy will need to be identified to co-ordinate such ongoing notifications to the CQC, which are a legal requirement.

**March 2013**

Make sure you have notified the CQC of any substantive changes since your application was submitted. If your CQC registration letter has not arrived by now check where it has got to, and once it is available check that it is accurate – for example, does it include all the services that you offer?

**April 2013 onwards**

Celebrate your CQC registration – but don't relax too much. Check the ongoing requirements that practices will need to follow once registered on the CQC website, and be aware that a CQC inspector can arrive at any time – announced or unannounced.

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