

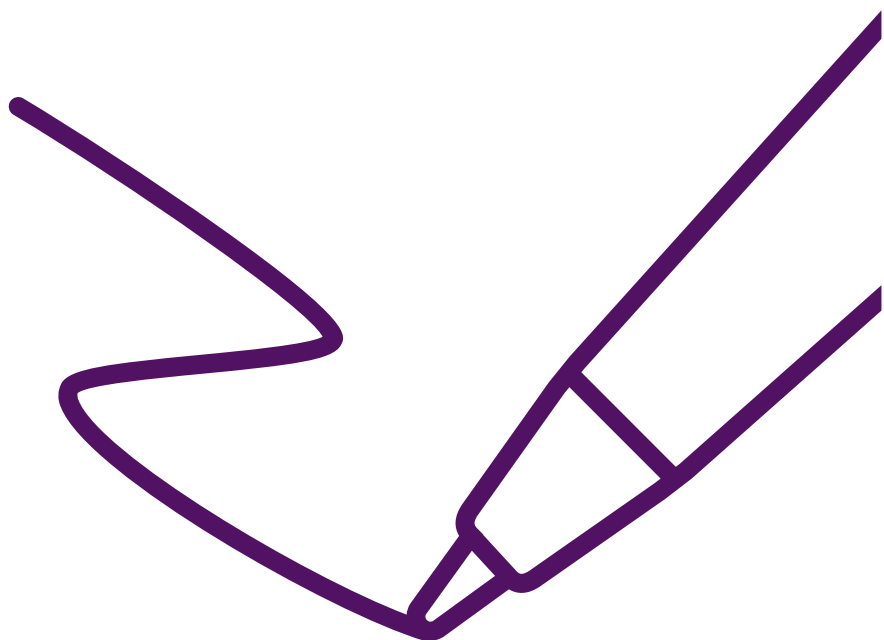


# Regulation 18: Notification of other incidents

Guidance for care providers on the duty  
to report events or occurrences to the  
Care Quality Commission (CQC)

---

*Here's some extra help – if you need it.*



# Introduction

---

**This guidance has been produced for care providers, with the intention of summarising and clarifying the events or occurrences that must be notified to CQC.**

This guidance is not exhaustive, and should be read alongside the [Care Quality Commission \(Registration\) Regulations 2009: Regulation 18 \(CQC, 2024\)](#). A full list of reportable incidents can be found in the regulation text.

This guidance does not apply to health service bodies, the local authority, or providers of primary medical services. These services must refer to the regulation in full for guidance on their responsibilities.

**Please note:** CQC and the local authority may have different thresholds for the reporting of incidents. For more information about reporting safeguarding concerns, including information about local authority thresholds, refer to the [‘Raise a concern’ page](#) on our website.

## Your responsibilities

---

The regulation states that the registered person must notify CQC without delay, if any of the incidents specified in this guidance occur during the course of, or as a consequence of, services provided in the carrying out of a regulated activity.

For information about how to refer incidents to CQC, refer to [Notifications: guidance for providers \(CQC, 2024\)](#).

If, at any point, you are unsure about whether a notification is required, you can always seek advice from CQC directly, either:

- through the [provider portal](#);
- by email to [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk);
- by phone to 03000 616161.

# Notifiable incidents

---

**The incidents involving adults (over the age of 18) which must be referred to CQC are as follows:**

1. Any injury to a service user which has resulted in:

- an impairment of the sensory, motor, or intellectual functions of the service user, which is not likely to be temporary;
- changes to the structure of a service user's body;
- the service user experiencing prolonged pain or psychological harm;
- the shortening of the life expectancy of the service user.

For further guidance on what would be considered an 'injury', please refer to page 4 of this guidance.

2. Any injury to a service user which requires treatment by a health care professional in order to prevent:

- the death of the service user;
- an injury to the service user which, if left untreated, would lead to any of the bullet points listed in point 1.

3. Any abuse or allegation of abuse in relation to a service user.

4. Any incident which is reported to, or investigated by, the police.

5. Any event which prevents or threatens the service provider's ability to carry out the regulated activity safely and in accordance with the registration requirements. This may include:

- an insufficient number of suitably qualified, skilled, and experienced persons employed;
- an interruption in the supply of electricity, gas, water, or sewage lasting for longer than 24 hours;
- physical damage to the premises which has, or is likely to, have a detrimental effect on the care provided;
- the failure of, or malfunctioning of, fire alarms or other safety devices lasting for longer than 24 hours.

# Decision-making around injury

**To support your decision-making around referrals related to physical and psychological harm, please refer to the following questions.**

**Please note that these questions should be applied to injuries that lead to, or if left untreated are likely to lead to, damage lasting more than 28 days.**

*Please note that this list is not exhaustive.*

Has the injury affected the person's sight, hearing, touch, smell, or taste?

Has the injury affected any major organ of the body, including the brain or skin?

Are the bones, muscles, tendons, joints, or vessels affected?

Has the person developed a pressure sore of grade 3 or above?

Is the person in pain, lasting, or likely to last, for more than 28 days?

Has the person's speech, memory, judgement, or problem-solving been affected?

Is the person experiencing significant stress or post-traumatic stress disorder?

Are they experiencing psychosis, clinical depression, or clinical anxiety?

If the answer to any of the above is 'yes', you must notify the CQC of the incident, using the relevant notification process. For information about how to refer incidents to CQC, refer to [Notifications: guidance for providers \(CQC, 2024\)](#).