

Event medical providers and CQC registration

The window is open now: the dates, who is in scope, what it means for organisers, and what to do at every level. Full report

Operational Tactical Strategic

Correct as of	20 October 2026
Applies to	Event healthcare providers and event organisers in England, Wales, Scotland and Northern Ireland: see section 7
Version	1.1
By	OTAS Insights. Published by OTAS Live Ltd
Review	Internal wording check by OTAS Live Ltd. Not reviewed by a solicitor or clinician
Review due	20 January 2027, or sooner if the Event Healthcare Standard is published

Read this first. This report is general information for event professionals. It is not legal, clinical or regulatory advice, and it does not say whether any particular provider needs to register. CQC says that decision lies with the provider. Check the CQC guidance before you act.



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About this report. It expands OTAS Insight LG-002 with the dates, who is in scope and who is not, what the change means for event organisers, where the law applies, actions for each level, questions to ask a medical provider and a checklist. Section 11 lists what we could not confirm. To ask for this report in another format, use the contact details on the OTAS Insights page.

1 Summary

From 6 December 2027, it will be an offence in England to provide treatment of disease, disorder or injury at an event without being registered with the Care Quality Commission (CQC) [6][13]. The government has removed two exceptions that kept most event healthcare out of CQC regulation [10]. The registration window opened on 7 September 2026. CQC says applications that are complete and received by 1 March 2027 should get an outcome on or before 6 December 2027. Later applications will still be assessed, but may not be decided in time [1][6].

The change matters to anyone who provides medical cover at events, and to the organisers who book them. CQC registers the provider, not the event [3]. A provider who only gives first aid does not need to register. A provider whose care is given or supervised by a listed healthcare professional, such as a doctor, nurse or paramedic, is likely to need to [4][5]. CQC says the decision about whether registration is needed lies with the provider [8].

This report explains what has changed, the dates, who is likely to be in scope and who is not, what it means for event organisers, and what to do at each level: Operational, Tactical and Strategic. It applies to England. Wales, Scotland and Northern Ireland have their own regulators, and section 7 explains what we could and could not confirm for them. It is general information, not legal or clinical advice.

At a glance. CQC registration for event healthcare: the window is open now [1].

- 7 September 2026: providers can apply to register, or update an existing registration [6].
- 1 March 2027: apply by this date, with a complete application, to expect a decision by 6 December 2027 [6].
- 6 December 2027: CQC starts monitoring, inspection and enforcement. Delivering this care at events without registration becomes an offence [6].
- First aid only is not regulated activity. Care given or supervised by a listed healthcare professional usually is [4][5].
- Organisers do not register the event, but CQC says they share responsibility with providers for the right level of healthcare cover [3][5].

2 What has changed

2.1 Two exceptions removed

Treatment of disease, disorder or injury (TDDI) is one of the regulated activities under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 [11]. Until now, two exceptions kept most event healthcare outside it. One covered temporary treatment in a sports ground or gymnasium for people taking part in or attending sporting activities and events. The other covered such treatment for people attending or taking part in sporting or cultural events [10].

The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2026, made on 29 April 2026, remove both exceptions [10]. CQC says this means there are no longer any exceptions in the regulations based on location. If a service meets the criteria for TDDI, whoever is responsible must register, wherever the activity takes place [3].

2.2 Why the law changed

CQC links the change to the Manchester Arena Inquiry volume 2 report, which asked the Department of Health and Social Care (DHSC) to consider a standard for healthcare at events, contained in statutory regulation and enforced by a regulator (recommendations 132 to 134) [3][16]. The government proposed removing the exceptions in spring 2024 [3].

CQC also says its own regulatory work has shown significant risk in independent medical care at events, and that in some cases the care resulted in serious harm [3]. DHSC told a Lords committee that CQC evidence shows instances where providers employ listed healthcare professionals known to carry out unsafe care at events [15].

2.3 Introduced in stages

The new rules start in stages "to give providers time to prepare and to minimise disruption to the events sector" [1]. DHSC told the Lords committee that CQC asked for a six-month delay in April 2025, moving the start of applications from March to September 2026, and that the government agreed in August 2025 [15]. CQC says the dates are set in legislation, so it cannot change them [6].

3 The dates that matter

Date	What happens
29 April 2026	The amending regulations are made [10].
7 September 2026	Providers can apply to register with CQC, or update their registration [1][6].
24 September 2026	CQC announces that the registration window is open [1].
1 March 2027	Complete applications received by this date: CQC will take all reasonable steps to give an outcome on or before 6 December 2027 [6].
Before 6 December 2027	CQC will publish guidance on any sector-specific arrangements for assessing event healthcare providers [9].
6 December 2027	CQC starts regulating TDDI at event sites. Providing it without registration becomes an offence [6].

Table 1. Key dates. Sources: SI 2026/495 and CQC, opened 20 October 2026.

Until 5 December 2027, providers can carry on delivering care at events while they apply [6]. From 6 December 2027, carrying on a regulated activity without registration is an offence under section 10 of the Health and Social Care Act 2008. On conviction it can lead to a fine, imprisonment, or both [13].

DHSC said CQC had planned timeframes for assessing applications from up to 1,000 providers [15]. CQC encourages providers not to wait until the end of the registration period to check whether they need to register [1].

4 Who needs to register

4.1 The test

CQC says a healthcare provider must be registered if it delivers TDDI that is provided by, or under the supervision of, a listed healthcare professional, or by a team that includes a listed healthcare professional supervising treatment in their professional capacity [4].

The listed healthcare professionals are: medical practitioner, dental practitioner, dental hygienist, dental therapist, dental nurse, dental technician, orthodontic therapist, nurse, midwife, biomedical scientist, clinical scientist, operating department practitioner, paramedic and radiographer. The list has not changed [4][11].

4.2 CQC registers the provider

CQC registers the provider: the legal entity responsible for carrying on the regulated activity. That can be an individual, a partnership or an organisation such as a company, charity or governing body [4]. It does not register the event itself [3].

- **Volunteers.** There is no exemption for voluntary services. A volunteer who is solely responsible for the care they give needs to register. If an organisation commissions them, the organisation registers [8]. CQC sets out options: a governing body can take on responsibility and register, an organiser can ask an established provider to deliver the care, or each volunteer can register as an individual provider [4].
- **More than one provider at an event.** Each provider decides for itself whether it needs to register, and it is common for several providers on one site to need registration [4]. Working together does not by itself bring an out-of-scope provider into scope. But where one provider's own multi-disciplinary team includes a listed healthcare professional, that provider must be registered [8].
- **One base, many events.** A provider that works from one base will usually register one location: the base it manages the care from, not each event site [8].
- **Already registered for TDDI.** You do not need to apply again. Check whether your registration needs changes, such as a new location, and review your Statement of Purpose [1][4].

4.3 Getting ready to apply

DHSC told the Lords committee that preparing may include identifying or onboarding a registered manager, appointing a nominated individual and putting robust policies and procedures in place, and that all of these need to be in place before a provider applies [15]. Completed applications for event healthcare go by email to HSCA_Events@cqc.org.uk, and questions to enquiries@cqc.org.uk [7]. CQC says using any other address will delay the application [7].

5 What is not in scope

CQC lists existing exceptions that still apply. They are not specific to events [5].

5.1 First aid only

If you **only** provide first aid, you do not need to register, because first aid is not a regulated activity [5]. CQC describes first aid as the initial response to a sudden illness, injury or condition, intended to preserve life, prevent deterioration, give comfort and support the person until further help arrives, and limited to interventions generally recognised as first aid. It can include simple observations, CPR and the use of a defibrillator [5].

First aid does not include clinical diagnosis, treatment needing a listed professional's judgement, interpreting clinical investigations, prescribing prescription-only medicines, using patient group directions, or ongoing treatment [5]. When a listed professional relies on the skills or judgement of their professional registration, CQC no longer treats it as first aid [5].

Where the line moves. CQC gives the example of a first aid company whose first aiders ask a listed healthcare professional for clinical advice, for example about signs of infection. CQC says that interaction has moved beyond first aid, and the company would need to register for TDDI [8].

DHSC gave the Lords committee an example in which a provider commissioned for first responder care only, not supervised by a listed professional, would be out of scope at one event but in scope at another, where the arrangement is different [15]. The test is applied to what is delivered at each event.

5.2 Roles and professions not on the list

Emergency care assistants, first responders in emergency care and ambulance care assistants are not listed healthcare professionals [5]. CQC's examples say physiotherapists and pharmacists are not on the list either, so a physiotherapist on standby, or a first aid company that employs a pharmacist, would not need to register for that reason [4][8].

5.3 Transport on and off site

Transport within the confines of a site used for a sporting or cultural event is excepted. Taking people beyond the event boundary, for example to hospital, needs registration for a different regulated activity: transport services, triage and medical advice provided remotely [5]. Providers are responsible for knowing where the boundary lies and may be asked for evidence of it [5].

5.4 Other exceptions

- **A doctor in a consulting room.** A medical practitioner who is already registered for TDDI, or employed by such a provider, and who only treats people in a surgery or consulting room on site, can fall within an exception. It does not apply if they are also expected to treat people across the wider event, or for listed procedures such as sedation or intravenous medicines [5][8].
- **Treatment arranged by an employer.** For example, a professional player treated at their club under arrangements made by their employer. This does not extend to family or friends [5][8].
- **Armed forces** defence medical or dental treatment [5].

6 What it means for event organisers

6.1 Organisers do not register, but they share responsibility

CQC will not register events, and it will not specify or advise on the level of healthcare cover for an event [3]. It says event organisers, together with healthcare providers, are responsible for making sure each event has the appropriate level of healthcare cover, decided by risk assessment and relevant guidance [5]. Providers are responsible for employing enough suitably qualified, competent and experienced staff, and for keeping staff within the limits of their competence [5].

In practice, this means organisers will be booking providers whose registration status becomes a legal question from 6 December 2027. It is sensible to ask about it now, in tenders and contracts for events from late 2027 onwards.

6.2 The Event Healthcare Standard: not yet published

CQC points to the Event Healthcare Standard as relevant guidance [3][5]. DHSC is overseeing its development, informed by research including a UK Health Security Agency review published in February 2026 [14]. DHSC told the Lords committee the Standard would be non-statutory, due for initial publication later in 2026, then evaluated, with the option of putting it on a statutory footing considered [15].

When we searched GOV.UK on 20 October 2026, we found no published Event Healthcare Standard [21]. Until it appears, organisers and providers still need to set the level of cover by risk assessment.

7 Where the law applies

England only. CQC is the regulator of health and adult social care in England [17]. Under the Health and Social Care Act 2008, a regulated activity has to involve health or social care in, or in relation to, England [12]. The amending regulations extend to England and Wales as a matter of law, but they amend the English regulated activities [10][12].

- **Wales.** Healthcare Inspectorate Wales is the independent regulator of healthcare in Wales and regulates independent healthcare providers [18]. We could not confirm from official pages how, or whether, its rules apply to event medical providers.
- **Scotland.** Healthcare Improvement Scotland carries out inspection, review and regulation of healthcare in Scotland [19]. This change does not apply in Scotland. We could not confirm from official pages whether event medical providers need to register in Scotland.
- **Northern Ireland.** The Regulation and Quality Improvement Authority monitors and inspects health and social care services in Northern Ireland [20]. We could not confirm how its rules apply to event medical providers.

If you work across the UK, check each regulator directly. A provider based in England that works at events elsewhere should ask CQC and the regulator where the event takes place.

8 What to do

Operational

- Know whether your role on the day is first aid only, or clinical care given or supervised by a listed professional [5].
- Work within the limits of your training and registration, and escalate when a case needs clinical judgement [5].
- If you are a first aider, know that asking a listed professional for clinical advice may bring the provider into scope [8]. Follow your provider's procedures.
- Record what care was given and by whom, as your provider requires.

Tactical

- List every healthcare and first aid provider on your events from late 2027, and what each one will deliver.
- Ask each provider whether it is registered with CQC, has applied, or has decided it is out of scope, and why [4][8].
- Agree the event boundary in writing, and who takes patients off site [5].
- Check the medical plan against your risk assessment. CQC will not set the level of cover for you [3].

Strategic

- Decide what evidence of registration you will require from providers, and from when, in contracts and tenders [6].
- If you run your own medical service or use volunteers, decide who is the legal provider and whether it needs to register and, if so, apply by 1 March 2027 [4][6].
- Budget for the change, including possible changes in who can supply cover.
- Watch for the Event Healthcare Standard and CQC's assessment guidance [9][15].

Action box

Level	Do this
Operational	Know whether your role is first aid only or clinical care, work within your training and registration, and escalate cases that need clinical judgement.
Tactical	List every provider, ask for its CQC position, agree the event boundary and off-site transport, and check the medical plan against your risk assessment.
Strategic	Set registration requirements in contracts, decide who is the legal provider for in-house or volunteer cover, apply by 1 March 2027 if needed, and budget for the change.

9 Tools

9.1 Questions to ask a medical provider (England)

- ☐ Is your organisation registered with CQC for treatment of disease, disorder or injury, or have you applied? On what date?



- ☐ If you say you are out of scope, what is the reason (first aid only, an exception, or no listed professional)?
- ☐ Which listed healthcare professionals will be on site, and who supervises the care?
- ☐ Will you take patients beyond the event boundary, and are you registered for transport services if so?
- ☐ Which other providers will work with you on site, and who is responsible for what?
- ☐ Is your Statement of Purpose up to date for event work?
- ☐ How do you make sure staff work within their competence and registration?

9.2 Checklist for organisers (England)

- ☐ Every healthcare and first aid provider listed for events from December 2027
- ☐ Each provider's CQC position recorded, with the date checked
- ☐ Event boundary and off-site transport agreed in writing
- ☐ Contracts and tenders updated to ask for registration evidence
- ☐ Level of cover set by risk assessment and recorded
- ☐ In-house or volunteer cover reviewed: who is the provider?
- ☐ Event Healthcare Standard and CQC assessment guidance watched for

10 Frequently asked questions

When does CQC registration for event medical providers start?

Providers can apply now. The window opened on 7 September 2026. CQC starts regulating on 6 December 2027, when providing this care at events without registration becomes an offence [1][6].

What is the deadline to apply?

Apply by 1 March 2027 with a complete application if you want an outcome by 6 December 2027. Later applications will still be assessed, but may not be decided in time [6].

Do first aid providers need to register with CQC?

Not if they only provide first aid. If listed healthcare professionals give or supervise clinical care, or first aiders seek clinical advice from them, registration is likely to be needed [5][8].

Does the event organiser need to register?

No. CQC registers providers, not events. CQC says organisers and providers are both responsible for making sure the event has the right level of healthcare cover [3][5].

Do volunteer medical teams need to register?

There is no exemption for volunteers. Whoever is responsible for the care, whether an individual volunteer or the organisation that commissions them, needs to register if the care is in scope [4][8].

Does this apply in Scotland or Wales?

The CQC requirement covers health care in, or in relation to, England [12][17]. Wales, Scotland and Northern Ireland have their own regulators [18][19][20]. If you work at events outside England, check with CQC and the regulator where the event takes place.

11 What we don't know yet

- **The Event Healthcare Standard.** DHSC said it would be published later in 2026 [15]. We found no published Standard on GOV.UK on 20 October 2026 [21].
- **How CQC will assess event providers.** CQC says its approach will be broadly the same as for other pre-hospital care providers, with sector guidance before 6 December 2027 [9].
- **How long applications will take.** CQC aims to decide complete applications received by 1 March 2027 by 6 December 2027 [6]. We do not know how many providers will apply.
- **The position in Wales, Scotland and Northern Ireland.** We could not confirm from official pages how each regulator treats event medical providers.
- **CQC's consultation response.** The CQC consultation page on this guidance blocked automated access on 20 October 2026, so we have not relied on it.

12 Sources

All web sources were opened and checked on 20 October 2026. The Lords committee report blocks automated access, so it was read with a browser-grade fetch on the day.

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2. CQC, 'Supporting registration guidance for delivering Treatment of disease, disorder or injury at events' (overview). <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi>
3. CQC, same guidance: 'Changes to the regulations'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/changes>
4. CQC, same guidance: 'Who needs to register'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/register>
5. CQC, same guidance: 'Relevant exceptions to registering'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/exceptions>
6. CQC, same guidance: 'When you may need to register'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/when>
7. CQC, same guidance: 'How to apply to register'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/apply>
8. CQC, same guidance: 'Examples of queries received about registering for TDDI at events'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/examples>
9. CQC, same guidance: 'Assessment'. <https://www.cqc.org.uk/guidance-regulation/providers/registration/supporting-registration-guidance-delivering-tddi/assessment>
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13. Health and Social Care Act 2008, section 10 (requirement to register as a service provider). <https://www.legislation.gov.uk/ukpga/2008/14/section/10>
14. UK Health Security Agency, 'Healthcare provision at events: a rapid scoping review' (19 February 2026). <https://www.gov.uk/government/publications/healthcare-provision-at-events-a-rapid-scoping-review>
15. House of Lords Secondary Legislation Scrutiny Committee, 54th Report, 'Additional information from the Department of Health and Social Care' (DHSC answers of March 2026). <https://publications.parliament.uk/pa/ld5901/ldselect/ldsecleg/273/27306.htm>
16. Home Office, 'Manchester Arena Inquiry Volume 2: Emergency Response' (3 November 2022). <https://www.gov.uk/government/publications/manchester-arena-inquiry-volume-2-emergency-response>
17. CQC, 'About us'. <https://www.cqc.org.uk/about-us>
18. Healthcare Inspectorate Wales, 'About us'. <https://www.hiw.org.uk/about-us>
19. Healthcare Improvement Scotland (home page). <https://www.healthcareimprovementscotland.scot/>
20. Regulation and Quality Improvement Authority, Northern Ireland (home page). <https://www.rqia.org.uk/>
21. GOV.UK site search for "event healthcare standard", run on 20 October 2026. <https://www.gov.uk/api/search.json?q=%22event+healthcare+standard%22>

13 About this report

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Edited by Kris Dailly, who has worked in event operations since 2008, and internationally since 2015.

Version 1.1, 20 October 2026. Review due: 20 January 2027, or sooner if DHSC publishes the Event Healthcare Standard or CQC publishes its assessment guidance.

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