



Event medical providers and CQC registration

The window is open now

The dates, who is in scope and who is not, what it means for organisers, and what to do at every level

OTAS Insight LG-002 | All levels: Operational • Tactical • Strategic

Correct as of 20 October 2026 | England | Not legal or clinical advice | otas.live/insights/



The short version: event healthcare comes under CQC

The change

Registration needed from 6 Dec 2027

- Two exceptions removed by law
- Window opened 7 September 2026
- Apply by 1 March 2027
- Then an offence if unregistered

Not in scope

First aid only

- First aid is not regulated activity
- Some roles are not on the list
- Transport within the site is excepted
- Each provider decides its position

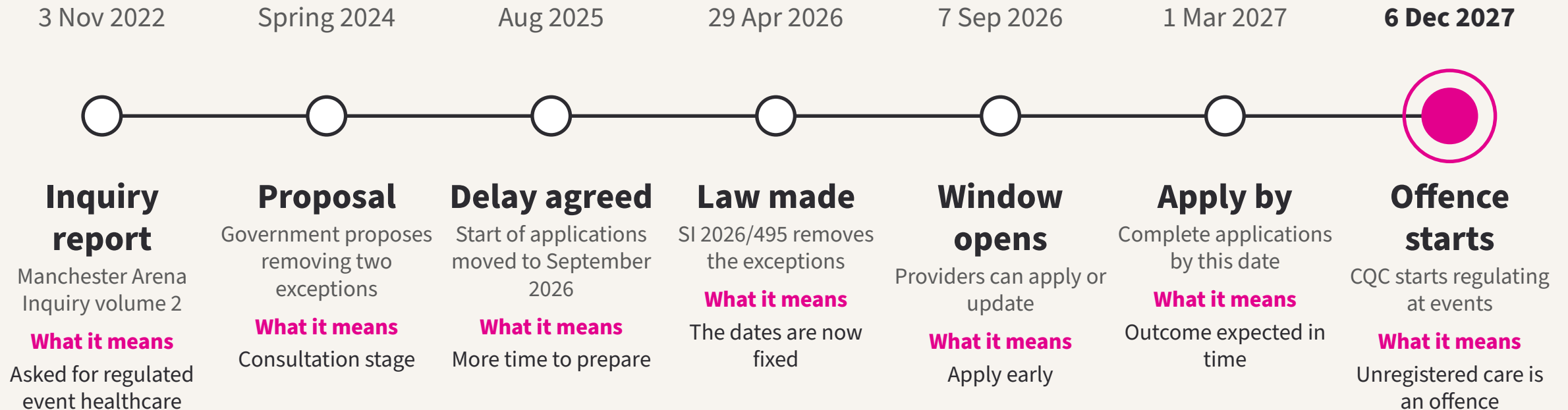
What to do

Check, ask, apply

- Providers: check scope and apply early
- Organisers: ask every provider
- Put it in contracts for late 2027

England only. Wales, Scotland and Northern Ireland have their own regulators. General information, not legal advice.

How we got here, and the dates to plan for



CQC says the dates are set in legislation and it cannot change them. Providers can keep delivering care while they apply, until 5 December 2027.

Who is likely to be in scope, and who is not

01 • In scope

Listed professionals

Care given or supervised by a doctor, nurse, paramedic or other listed professional

The core test

02 • In scope

Clinical advice to first aiders

CQC: first aiders asking a listed professional for clinical advice moves beyond first aid

The line can move on the day

03 • In scope

Volunteers

No exemption for voluntary services. Whoever is responsible registers

Agree who that is

04 • Not in scope

First aid only

First aid is not a regulated activity

Includes CPR and defibrillator use

05 • Not listed

Some roles

Emergency care assistants, first responders, ambulance care assistants, physiotherapists, pharmacists

Not on the list

06 • Depends

Transport

Within the site is excepted. Off site, for example to hospital, needs another registration

Agree the boundary

CQC says the decision about whether registration is needed lies with the provider. Source: CQC guidance, 20 October 2026.

Organisers: what CQC will and will not do

- **Registers providers** CQC registers the legal entity that carries on the care, not the event.
- **Not the event** CQC will not register the event itself.
- **Not the level of cover** CQC will not specify or advise on the healthcare cover an event needs.
- **Shared responsibility** CQC says organisers and providers are responsible for the right level of cover.
- **By risk assessment** Cover is set by risk assessment and relevant guidance.
- **Each provider decides** With several providers on one site, each decides whether it needs to register.

What organisers can ask for

Registration registered, applied, or out of scope, and why

People which listed professionals, and who supervises

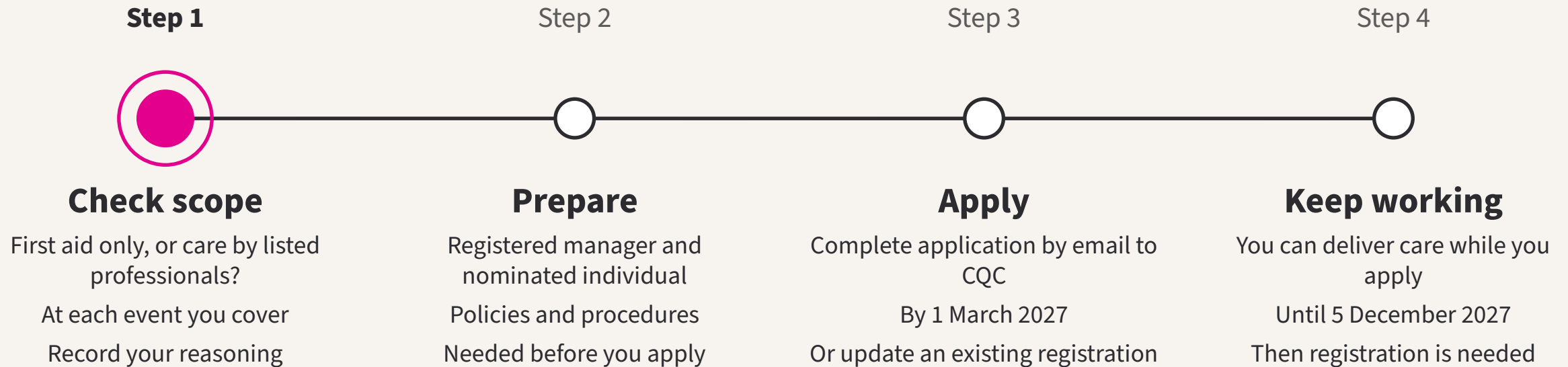
Boundary where the event site ends

Transport who takes patients off site

The guidance gap

The Event Healthcare Standard was not published when we checked on 20 October 2026.

Four steps for providers before 1 March 2027



Already registered for TDDI? You do not apply again. Check your registration, locations and Statement of Purpose.

14 listed healthcare professionals bring care into scope

14

listed healthcare professionals. Care given or supervised by any of them, or by a team that includes one, is the test for registration.

Medical and dental. Medical practitioner, dental practitioner, dental hygienist, dental therapist, dental nurse, dental technician, orthodontic therapist.

Nursing and midwifery. Nurse and midwife.

Science and theatre. Biomedical scientist, clinical scientist, operating department practitioner.

Pre-hospital and imaging. Paramedic and radiographer.

The list has not changed. It is set out in the 2014 Regulations.

Operational: what medics, first aiders and crew can do

- **Know your role** First aid only, or clinical care given or supervised by a listed professional?
- **Stay within it** Work within your training and your professional registration.
- **Escalate** Pass cases that need clinical judgement to the right clinician.
- **Know the line** Asking a listed professional for clinical advice may bring your provider into scope.
- **Record it** Note what care was given and by whom, as your provider requires.
- **Know the boundary** Where the event site ends, and who takes patients off site.

Whose duty it is

Registration is for the provider. Working within your competence is for every clinician and first aider.

What to expect

- A briefing on your scope
- A clear escalation route
- The provider's procedures
- A named clinical lead
- Records kept as required

If in doubt, ask your provider before the event.

Tactical: what event, safety and medical leads put in place

01

List every provider

Healthcare and first aid, for events from late 2027

Keep: provider list with dates

02

Ask their CQC position

Registered, applied, or out of scope, and the reason

Keep: replies, dated

03

Agree the boundary

Where the site ends and who transports patients off site

Keep: site plan note

04

Check the medical plan

Against your risk assessment. CQC will not set the level of cover

Keep: plan version and date

05

Map who works together

Which providers share cases, and who is responsible for what

Keep: roles agreed

06

Brief the teams

First aid scope, escalation and records

Keep: briefing notes

Three levels: Operational for crew on the ground, Tactical for event, safety and medical leads, Strategic for organisers and directors.

Strategic: what organisers and directors decide

Step	What it looks like	Evidence to keep
Set the requirement	Registration evidence in contracts and tenders for events from December 2027	Contract clause
Decide the provider	For in-house or volunteer cover, who is the legal provider?	Decision note
Apply in time	If in scope, a complete application by 1 March 2027	Application date
Plan supply	Who can supply cover after December 2027	Supplier list
Budget	Possible cost changes in medical cover	Budget line
Set the cover	By risk assessment and relevant guidance	Risk assessment
Check other nations	For events in Wales, Scotland or Northern Ireland, ask the regulator there	Enquiry record
Watch for guidance	The Event Healthcare Standard and CQC assessment guidance	Review date

Not a legal standard or a complete list. Whether a provider needs to register is for the provider to decide, using the CQC guidance.

What we don't know yet: 6 open points

01 • Not published

Event Healthcare Standard

DHSC said later in 2026. Not on GOV.UK on 20 October

Now: set cover by risk assessment

02 • Due

CQC assessment guidance

Before 6 December 2027

Now: read the registration guidance

03 • Unknown

Application volumes

DHSC said CQC planned for up to 1,000 providers

Now: apply early

04 • Not confirmed

Wales

Healthcare Inspectorate Wales regulates independent healthcare

Now: ask HIW directly

05 • Not confirmed

Scotland

This change does not apply in Scotland

Now: ask Healthcare Improvement Scotland

06 • Not confirmed

Northern Ireland

RQIA monitors and inspects services there

Now: ask RQIA directly

Open on 20 October 2026. This deck gives no view on whether any particular provider needs to register.



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and Professionals
at every stage

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Are your event medical arrangements ready for CQC registration in England?

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Errors are corrected openly, on every format, and logged with the date.

Key sources: CQC news (24 September 2026) and registration guidance for events; SI 2026/495; Health and Social Care Act 2008; Lords committee 54th report; UKHSA review; HIW, HIS and RQIA

Spotted an error? Tell us using the contact details on the OTAS Insights page.

General information, not legal or clinical advice. Correct as of 20 October 2026. England only.

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Briefing card • about 1 minute

“Before we start: from 6 December 2027, clinical care at events in England has to come from a provider registered with CQC. Today, know which you are doing: first aid, or clinical care.

If you are a first aider, stay within your training. If a case needs a clinical decision, pass it to the clinician on duty, and follow our procedure for doing that.

Clinical lead: _____ **Call sign:** _____

Treatment point: _____ **Off-site transport:** _____

Record what you did and who did it. Do not move a patient beyond the site boundary unless that is your role. Any questions?”

For events in England. Fill in the blanks first.

Before the doors open: the checklist, by level

Operational know your role and its limits; escalate clinical decisions; record care; know the site boundary.

Tactical list every provider; ask for its CQC position; agree the boundary and off-site transport; check the medical plan.

Strategic require registration evidence in contracts; decide who is the provider for in-house cover; apply by 1 March 2027 if needed.