

Registered Manager Policy

Sample policy template. This is a Verivius-authored template based on the verbatim text of the statutory source. Tenants adapt the operational sections to their own organisation. Where this template and the live regulation diverge, the live regulation wins.

Statutory anchor: Regulation 7, Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (SI 2014/2936) **Primary source:** <https://www.legislation.gov.uk/ukxi/2014/2936/regulation/7> **Last reviewed:** 2026-06-01
Verivius pack version: v1.1, 2026-06-01

1. What the regulation says

of good character ... has the necessary qualifications, competence, skills and experience to manage the carrying on of the regulated activity ... able by reason of M's health, after reasonable adjustments are made, of doing so ... able to supply to the Commission ... the information specified in Schedule 3.

The full text of the regulation is at <https://www.legislation.gov.uk/ukxi/2014/2936/regulation/7>. Where this policy and the regulation diverge, the regulation wins.

2. Plain British summary

A registered manager has to be fit to manage the regulated activity. That means good character, the qualifications, competence, skills and experience to manage the activity, sound health (with reasonable adjustments), and being able to supply Schedule 3 information about themselves to CQC.

3. Scope

This policy applies to the Registered Manager position at <provider name> for every CQC-registered location. It covers the appointment process, the Reg 7 fitness conditions, the Schedule 3 information set for the RM, the day-to-day RM accountability, the handover process when an RM changes, the notification of cessation of RM registration to CQC, and the interim arrangements where an RM cannot continue.

(Tenant updates the angle-bracket placeholder.)

4. Roles and responsibilities

- **Registered Manager:** the named person registered with CQC for the regulated activity at each location. Accountable for the day-to-day management of the regulated activity. Carries personal regulatory accountability alongside the provider.
- **Nominated Individual:** holds provider-side accountability. Where an NI is in place (under Reg 6 for corporate-body providers), the NI is the named line for CQC communication. The NI and RM are usually different people; in a small partnership or sole trader, they may be the same.
- **Provider (the registered legal entity):** holds the provider-side registration. Maintains the RM's Schedule 3 file alongside the RM's own employment record.
- **HR Lead:** supports the RM appointment process (recruitment, references, DBS, qualification verification, fit-and-proper-persons check).
- **All staff:** know who the RM is for their site and the route to escalate to the RM.

(Tenant updates the named role-holders.)

5. Procedure

The RM procedure operationalises the Reg 7 fitness conditions across the lifecycle of an RM at the provider.

1. **Recruitment.** When an RM vacancy opens (resignation, retirement, dismissal, end of fixed-term, additional registration), recruitment runs through the standard recruitment process plus the Reg 7-specific fitness checks: good character, qualifications and competence and skills and experience appropriate to manage the regulated activity, sound health with reasonable adjustments, ability to supply Schedule 3 information.
2. **Schedule 3 information.** The candidate RM provides the Schedule 3 information set (per the Fit and Proper Persons Employed Policy at [hscra-reg-19-fit-and-proper-persons-employed](#)): identity and recent photograph, DBS at the appropriate level for the role, conduct evidence from previous employment in regulated services, qualification evidence, full employment history with explanations of gaps, health declaration. The information is verified by the HR Lead and held in the RM's file.
3. **Fit-and-proper-persons-directors check (where applicable).** For corporate-body providers where the RM is also a director, the Reg 5 fit-and-proper-persons-directors test applies in addition. The Reg 5 file (a Schedule 4 information set) is maintained separately.
4. **CQC registration application.** The candidate RM applies to CQC for registration as RM for the named regulated activity at the named location through the CQC online portal. The application includes the Schedule 3 information, the application reference, and the timeline.
5. **Interim cover during transition.** Where the previous RM has left and the new RM is not yet registered, the provider arranges interim management cover. A formal notification of the

situation to CQC is made (per Reg 7 read with the registration framework: the provider should not operate without an RM, but where transition gaps occur, transparency with CQC is the right move). The interim cover arrangement is recorded.

6. **Onboarding the new RM.** Once registered, the new RM is on-boarded into the role: handover from the previous RM (where the previous RM is still available), familiarisation with the platform's records, introduction to the team, introduction to any external agencies (commissioners, local authority safeguarding, local infection control team, CQC inspector if assigned).
7. **Day-to-day RM accountability.** The RM operates the day-to-day management of the regulated activity: signs off the policies that need RM sign-off, chairs the relevant governance meetings, reads the platform's dashboard, reviews and approves significant decisions, manages the leadership team.
8. **Continuing fitness.** The RM's continuing fitness is monitored: appraisal annually, DBS renewal per the role's cadence (typically every 3 years), professional-regulator registration current (where applicable), health declarations refreshed at each appraisal, training matrix current per the role's mandatory training profile.
9. **Cessation of RM registration.** When the RM leaves the role (resignation, retirement, dismissal, transfer), the RM submits a notification of cessation of registration to CQC through the CQC online portal. The provider concurrently submits the new RM's registration application. The timing is coordinated to minimise any gap.
10. **No-RM contingency.** Where an RM cannot continue and an immediate replacement is not available (sudden resignation, illness, death), the provider notifies CQC immediately, arranges interim cover, and accelerates the recruitment-and-registration of a successor. The contingency plan is documented in this policy's section 5 step 5.

6. Training requirement

- The RM completes RM-specific training appropriate to the sector at appointment and continuing professional development annually (typical examples: registered-manager apprenticeship for ASC, equivalent management qualifications for healthcare).
- The RM completes refresher training in regulatory frameworks (Health and Social Care Act 2008 Regulated Activities Regulations, Care Act 2014 where in scope, MCA 2005, MHA 1983 where in scope, GDPR) every two years.
- The RM completes leadership and management training (managing teams, handling complaints, financial management, performance management) per a continuing development plan.
- Staff supporting RM functions (HR, Nominated Individual) complete role-specific training.

Training records held in the tenant's training matrix register.

7. Audit

Compliance with this policy is monitored by the Nominated Individual (or the Provider where the NI role does not apply):

- **Annual RM appraisal:** structured appraisal against the Reg 7 fitness conditions; output recorded.
- **Annual Schedule 3 review:** the RM's Schedule 3 file refreshed; any renewable items (DBS, professional registration) checked against next-due dates.
- **Per-event review on any RM-fitness concern:** where a concern surfaces (a complaint, a regulatory issue, a performance issue), a structured review against the Reg 7 conditions is conducted with the outcome recorded.
- **Annual policy review:** the policy is read against the live Reg 7 text and current CQC guidance.

Audit findings recorded in the tenant's audit register; actions logged in the improvement-actions register.

8. Record-keeping

RM records (Schedule 3 information, appraisals, fitness reviews, CQC application and cessation correspondence, RM training records) are held in the provider's HR system for the duration of the RM's tenure plus a minimum of 6 years after the end of tenure under the Limitation Act 1980, aligned to the standard limitation period for civil claims.

Where the RM was also a director, the Reg 5 (fit-and-proper-persons-directors) file is retained for the same period.

Verivius preserves the per-record audit trail indefinitely while the workspace is active.

8. Record-keeping

The records this policy generates are kept for <retention period>, in <named system or location>. The retention period reflects <statutory requirement OR Verivius operational default, as applicable>.

9. Related policies in this pack

- Provider Responsibility Policy ([hscra-reg-4-provider-responsibility](#))
- Fit and Proper Persons (Directors) Policy ([hscra-reg-5-fit-and-proper-persons](#))
- General Requirements Policy ([hscra-reg-8-general](#))

10. Document control

Version	Date	Author	Changes
v1	2026-05-19	Verivius (sample)	Initial sample template.
v1.1	2026-06-01	Verivius (sample)	Filled out Sections 3 to 8 with concrete content. Section 4 names the Provider, NI, HR Lead roles. Section 5 expanded to a 10-step procedure covering recruitment, Schedule 3 information, fit-and-proper-persons-directors check (where applicable), CQC registration application, interim cover, onboarding, day-to-day accountability, continuing fitness, cessation, no-RM contingency. Section 6 names training tiers. Section 7 names the audit cadence. Section 8 references the Limitation Act 1980 retention period.

This sample policy template was issued by Verivius as part of the Mock Inspection design partner onboarding pack. It is a template, not a substitute for legal advice or the tenant's own policy-development process. Where this template and the live regulation diverge, the live regulation wins.

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