

**Additional Section 3: The condition you want to vary or remove**

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| Please provide details about the conditions you want to vary or remove.  If you are applying to vary or remove **more than one condition** for the **same regulated activity** you can download additional sections to vary or remove conditions from the website page where you found this form. Please give each condition a number so that we know you have sent us information about all the conditions you want to vary or remove.  If you are applying to vary or remove **exactly the same condition(s)** from **more than one regulated activity** fill in sections 3.1 and 3.2 below once only; you do not need to fill in and submit additional sections.  If you are applying to remove the condition **“The Registered Provider must not provide nursing care** under the 'accommodation for persons who require nursing or personal care' regulated activity”, you and any registered managers at relevant locations may need to apply to add additional regulated activities. Please see section 3 of the ‘Scope of Registration’ guidance on our website for more information.  If you are filling in this form on paper and need extra space, please add extra numbered sheets as needed, and mark them with the question number from this form. |

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| The information below is for condition no.: | **1** | of a total of: |  | conditions I/we want to vary or remove |

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| **\*3.1 The condition you want to vary or remove** |
| Please write or type the condition(s) of registration you want to vary or remove, **exactly** as it is written on your Certificate of Registration. |
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| I/we want to: | **VARY** |  | **REMOVE** |  | the condition shown at 3.1 above |

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| **\*3.2 The varied condition** |
| DO NOT FILL IN THIS SECTION if you want to REMOVE the condition at 3.1 above  Please write out the *varied* condition of registration, **exactly** as you want it to be written on your certificate of registration. |
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| **\*3.3 Effective date for removal or variation of a condition of registration** | | |
| Conditions in this application are not varied or removed unless and until you receive a Notice of Decision that confirms this. | | |
| \*When do you want the above removal or variation of a condition of registration to come into effect? (dd/mm/yy)? |  |  |
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| **\*3.4 Reasons and evidence** |
| Why are you applying to vary or remove this condition of registration? Please also tell us what evidence you have to support the application. We may ask you to send us this evidence. |
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| **\*3.5 The relevant regulated activities** | | | | | | |
| If you are applying to **vary or remove one or more conditions** of registration in relation to **just one** regulated activity, please check / tick the **sole** relevant regulated activity below.  If you are applying to vary or remove the **same** condition of registration across **more than one** regulated activity please check / tick the relevant regulated activities below.  Regulated activities are defined in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, Schedule 1. | | | | | | |
| Check / tick **ONE** only: | | | | | | |
| I / we want to | Vary or remove one or more condition(s) from **ONE** regulated activity |  | Vary or remove the **SAME** condition across **more than one** regulated activity | |  |  |
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| Personal care – (RA1) | | | |  | |  |
| Accommodation for persons who require nursing or personal care – (RA2)  (Please also see Section 3.12 in each location section if you have  checked/ticked this activity) | | | |  | |  |
| Accommodation for persons who require treatment for substance misuse – (RA3) | | | |  | |  |
| Treatment of disease, disorder or injury – (RA5) | | | |  | |  |
| Assessment or medical treatment for persons detained under the Mental Health Act 1983 – (RA6) | | | |  | |  |
| Surgical procedures – (RA7) | | | |  | |  |
| Diagnostic and screening procedures – (RA8) | | | |  | |  |
| Management of supply of blood and blood derived products – (RA9) | | | |  | |  |
| Transport services, triage and medical advice provided remotely - (RA10) | | | |  | |  |
| Maternity and midwifery services – (RA11) | | | |  | |  |
| Termination of pregnancies – (RA12) | | | |  | |  |
| Services in slimming clinics – (RA13) | | | |  | |  |
| Nursing care – (RA14) | | | |  | |  |
| Family planning service - (RA15) | | | |  | |  |