

# Digital Portal: Changing your provider details

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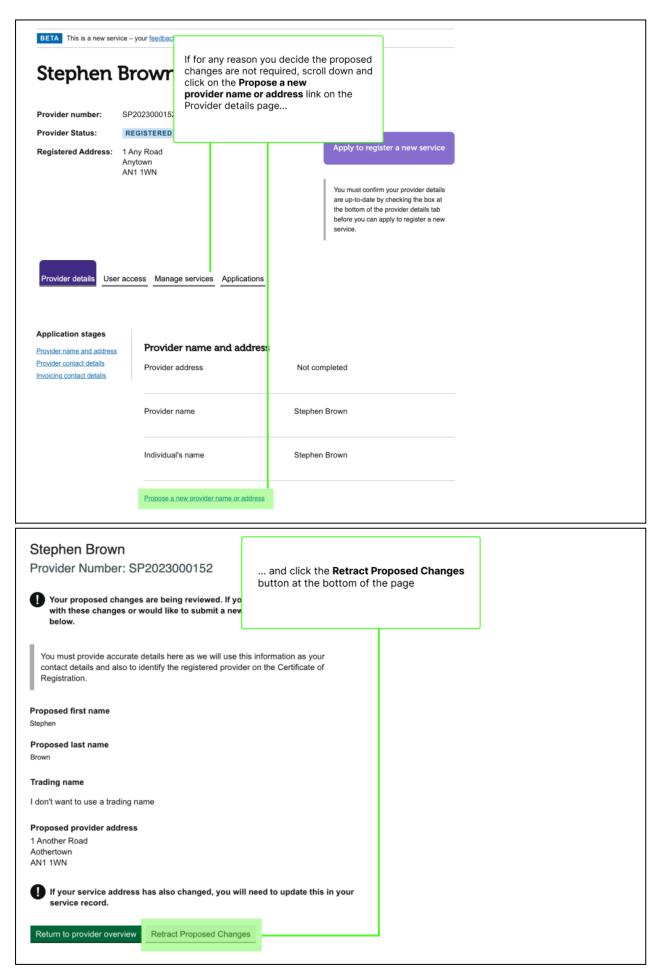
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# Changing provider details

* Portal home				
BETA This is a new service	– your <u>feedbac</u>	To propose a new p	rovider name or	
Stephen B	rowr	address, navigate to tab on the portal ho	o the <b>Provider details</b> ome page. ck on the <b>Propose a new</b>	
Provider number: S	P202300015			
Provider Status:	REGISTERED			
A	Any Road nytown N1 1WN		Apply to register a new service You must confirm your provider details are up-to-date by checking the box at the bottom of the provider details tab before you can apply to register a new service.	
Provider details User ad	ccess Mana	ge services Applications		
Application stages	Provid	er name and address		
Provider name and address Provider contact details Invoicing contact details	Provider		Not completed	
	Provider	name	Stephen Brown	
	Individua	l's name	Stephen Brown	
	Propose a	new provider name or address		
Propose a new	v provide	er name or addi	ress	
Stephen Brown			roposed changes into the form	
	e details here a	152 s we will use this information as istered provider on the Certific		
Individual's first name				
Stephen				
Individual's middle name (	optional)			
Individual's last name				
Brown				
I don't want to use a tr	ading name			

	Enter the proposed changes into the form
Address line 3 (optional)	and click the <b>Submit proposed changes</b> button at the bottom of the page.
	Note: if your service address has also
Town or city	changed, it will need to be updated in your service record.
Anytown	
Postcode	
AN1 1WN	
	es will be sent for a pproval. We may contact you to Il ask you to review your provider contact details. ges
Abandon changes On the next page we will Abandon change Abandon changes	Il ask you to review your provider contact details.
Abandon change  Abandon change  Abandon change  Abandon change  Abandon change  Abandon change  BETA This is a new service – your <u>feedback</u> will help to	Il ask you to review your provider contact details.
Abandon changes  Abandon change  Abandon chan	Il ask you to review your provider contact details.
Abandon changes On the next page we will Abandon change Abandon changes	Il ask you to review your provider contact details.
Abandon changes  Abandon change  Abandon chan	It ask you to review your provider contact details.
Abandon changes BETA This is a new service – your <u>feedback</u> will help the service relephone number Vervider telephone number Vervider telephone number Vervider telephone number (optional) Alternative telephone number (optional)	It ask you to review your provider contact details.
Abandon changes BETA This is a new service – your <u>feedback</u> will help the service relephone number Vervider telephone number Vervider telephone number Vervider telephone number (optional) Alternative telephone number (optional)	It ask you to review your provider contact details.

#### **Retracting changes**



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e or address
The form is displayed with the original details reinstated
this information as your der on the Certificate of

# Amending relevant individuals

Blossom (	Care	
Provider number: S	P2023000153	Actions
Registered Address: 1 A	An If you need to amend the provide nyt click the <b>Amend relevant individ</b> N1 <b>Provider details</b> page	duals link on the der details he box at
Provider details User an Application stages Provider name and address Provider contact details Relevant individuals Invoicing contact details	Manage services       Applications         Provider name and address       Provider address	1 Any Road Anytown AN1 1WN
	Provider name Company number	Blossom Care 123456789
	Relevant individuals Showing 1 of 1 record(s). Name Lisa Johnston Showing 1 of 1 record(s). Amend relevant individuals	Show <u>25. 5</u> <b>Role</b> Role

#### Details of relevant individuals

#### Blossom Care

Provider number: SP202300015	3	
Any changes you make your other application:	To add a relevant individual, click <b>individual</b> button	the <b>Add relevant</b>
Relevant individuals should		
<ul> <li>a director, manager or secr corporate other than a loca</li> </ul>		
· a partner in the firm (where the	e applicant is a firm)	
· a member of the firm (where the	ne applicant is a limited liability partnership	
· a member of the firm (where the	ne applicant is a limited partnership)	
<ul> <li>a person concerned in the main applicant is an unincorporated</li> </ul>	nagement or control of the association (wh association other than a firm)	ere the
Relevant individuals		
Showing 1 of 1 record(s).		Show 25, 50
Name	Role	
Lisa Johnston	Role	View
Lisa Johnston Showing 1 of 1 record(s).	Role	View

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Individual deta	ils
Blossom Care	
Provider number: SP2023000	153
Details of individual First name	Fill in the form with the details of the new relevant individual, taking care to read the guidance provided throughout the form
Middle name or other names	(optional)
Surname	
L	
Known as (optional)	
1	
How (in what capacity) d	oes this individual know this referee
	-
Occupation of referee	You may need to gather more information in order to
	<ul> <li>complete the form. If you need to return to complete the form at a later date, click the Save as draft button.</li> </ul>
How long has this individ	hus
For example, 2 3	
Years Months	
-	
Save changes Save as	e draft
Save changes	s draft Cancel

Details of releva	ant individuals		
Blossom Care			
Provider number: SP20230001	53		
Any changes you make your other applications			
Relevant individuals should <ul> <li>a director, manager or secr</li> </ul>	return to the form.		
corporate other than a loca			
<ul> <li>a partner in the firm (where t</li> <li>a member of the firm (where</li> </ul>	he applicant is a firm) the applicant is a limited liability partnership		
	the applicant is a limited liability partnership the applicant is a limited partnership)		
• a person concerned in the m	anagement or control of the association (wh ed association other than a firm)	ere the	
Relevant individuals			
Showing 2 of 2 record(s).		Show 25. 50	
Name	Role		
Lisa Johnston	Role	View	
Barry Green	DRAFT	View	

How long has this individual known the For example, 2 3 Years Months 5 2	is referee? Once the form is completed, click the <b>Save changes</b> button
Remove relevant individual	
Save changes Save as draft <u>Cane</u>	<u>~</u>

Details of relevant	t individuals		
Blossom Care			
Provider number: SP2023000153			
Any changes you make your other application:	The new relevant individual h	as now been a	added
Relevant individuals should			
<ul> <li>a director, manager or secr corporate other than a loca</li> </ul>			
a partner in the firm (where the a	,		
<ul> <li>a member of the firm (where the a</li> <li>a member of the firm (where the a</li> </ul>	applicant is a limited liability partnership		
	gement or control of the association (wh	ere the	
Relevant individuals			
Showing 2 of 2 record(s).		Show	25, <u>50</u>
Name	Role		
Lisa Johnston	Role	View	
Barry Green	Director	View	

Details of relevant individuals			
Blossom Care			
Provider number: SP20230001	53		
Any changes you make your other applications			
Relevant individuals should	To amend an existing relevant ind click the <b>View</b> link	vidual's detail	s,
<ul> <li>a director, manager or secr corporate other than a loca</li> </ul>			
<ul><li> a member of the firm (where</li><li> a person concerned in the m</li></ul>	he applicant is a firm) the applicant is a limited liability partnership) the applicant is a limited partnership) anagement or control of the association (where th ad association other than a firm)	Đ	
Showing 2 of 2 record(s).		Show 25, 50	2
Name	Role		_
Lisa Johnston	Role	<u>View</u>	
Barry Green	Director	View	
Showing 2 of 2 record(s).			-

Individual details		
Blossom Care		
Provider number: SP2023000	153	
Details of individual First name	Apply your changes to the form. You will only be able to view and edit the individuals personal details if you were the user who added them. If you did not add them, you will only be able to remove them.	
Middle name or other names	(optional)	
Surname		
Known as (optional)		
Date of birth		
For example, 23 11 2019		
Day Month Year		
Role in the organisation		

How long has this individual known thi For example, 2 3 Years Months 5 2 Remove relevant individual	this referee? To remove a relevant individual, select the <b>Remove this</b> <b>individual</b> checkbox	
Remove this individual           Save changes         Save as draft         Cancel	2el	

Remove relevant individual	
Remove this individual	Provide a reason for removal and click the <b>Save</b> changes button
Reason for removal	
Retired	
Save changes <u>Cancel</u>	

Details of releva	ant individuals						
Blossom Care							
Provider number: SP20230001	53						
Any changes you make your other application:		levant individual is no longer listed on the <b>s of relevant individuals</b> page					
Relevant individuals should							
<ul> <li>a director, manager or secr corporate other than a loca</li> </ul>							
a partner in the firm (where the second s							
	the applicant is a limited liability	,					
a person concerned in the m	the applicant is a limited partner nanagement or control of the ass ed association other than a firm)						
Relevant individuals							
Showing 1 of 1 record(s).		Show 25, 50					
Name	Role						
Lisa Johnston	Role	View					
Showing 1 of 1 record(s). Add relevant individual							
There must be at least one	relevant individual recorded.						
Return to provider overview							
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