



How to complete the provider information return (PIR):

Residential care

July 2014

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Purpose:

From the 1st October 2014, we are changing the way we are regulating and inspecting adult social care. To understand more about why, how and when we are changing; and our priorities and principles please look at our consultation on how we propose to regulate, inspect and rate services [link](#)

This PIR is an important element of our new inspection process. We are asking for this information under Regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Please provide the information we require using this form. It will help us plan our inspections by asking you to provide us with data, and some written information under the questions:

- Is the service safe?
- Is it effective?
- Is it caring?
- Is it responsive?
- Is it well-led?

This return is being used as a pre-inspection questionnaire and we would like you to fill it in and return it to us by the deadline stated in the email to you. We won't tell you in advance when your inspection will be, and the date you receive or return the form will not decide the date we visit your service. The information you include in your return will help inspectors decide on the areas they need to look at during their visit. Some of the content may also be used to inform national reporting. When we use information in this way, it won't be attributed to any provider. You might find it helpful to use the return as part of your quality assurance process and as a way of understanding and reviewing how well you are meeting the five 'key questions'.

Completing the return:

All Returns

- The PIR is arranged under the five key question areas (safe, effective, caring, responsive and well-led).
- There is a guidance document to help you with filling in the content of the form. Please use 'How to complete the provider information return (PIR)' document to help you complete each section [link](#).
- Further information about the five questions can be found in the 'Adult social care: residential care services provider handbook' [link](#) and appendices [link](#). It is recommended that you read this to have a fuller understanding of what the five questions mean, and what we would like you to focus on in your response. These will be updated on 1st October.
- Please ensure your location ID is correctly filled in at the start of the form or we will not be able to identify which location the information refers to and we will have to ask you to redo the form again. This information can be found in the email we sent you.
- You should make your answers as concise and clear as possible. We encourage you to use bullet points to help you do this.

- You should include examples of evidence to support what you have written in your responses.
- Each free text question within the document has a limit of 2,500 characters. You will only be notified on completion if you have gone over this limit. If this happens, please review your answer to ensure it fits within the character limit.
- The questions in the data sections ask you for simple responses to questions predominantly in the form of a number, a date or a yes/no confirmation.
- Please do not send attachments with the PIR. If we need further information, we will contact you.
- There are 'evaluation questions' at the end of the PIR. We would very much like you to answer these questions as fully as possible to help us to improve the PIR.
- Once you have completed and returned the form, we may contact you to ask further questions and clarify and provide further detail.

Online Return (web version)

- The PIR can be saved by clicking the Save button located at the bottom of the return. Once you have done this it will be saved online (you will be sent an email with a link to the saved return).
- You must complete and submit the PIR before the deadline date and within 28 days of starting the online form otherwise the information you have entered previously will be lost.
- Some questions have guidance to help you understand what we want you to tell us. You can access the guidance by clicking on the (?) next to a question.
- Some questions are mandatory, these are shown by a * at the end of a question. These need to be completed otherwise the form will refuse to be submitted.

Offline Return (Adobe PDF version)

- Please save the PIR on your computer by using the 'file > save as' function before starting to enter information.
- Save the document regularly to ensure you do not lose the information you have entered.
- You can use the 'tab' key to move between the questions.
- Once you have completed the PIR, please submit it by clicking on the submit button which is located at the bottom of the PIR.
- Some questions have guidance to help you understand what we want you to tell us. You can access the guidance by hovering over the response fields for each question.
- Some questions are mandatory; these are shown by the entry fields being highlighted in red. If you cannot see this, please click on the 'Highlight Existing Fields' button in the top right corner of the browser window.
- All date questions require the response in DD/MM/YYYY format.

- Please put N/A in any mandatory questions that follow on from a question that you are not required to fill in otherwise

Information about the service and the person completing the PIR

Your Service:

Guidance

This **email address** will be used in the 'Save & Exit' function of this return. This will enable you to complete the return over a period of time.

1. Information to support the question 'Is the service safe?'

1a. How do you ensure the service you provide is safe?

By safe, we mean that people are protected from avoidable physical, psychological and emotional harm; abuse, discrimination, and neglect.

Please consider how you balance protection from hazards with reasonable choice and control; how risks, premises, equipment and medicines are managed; how outbreaks of infection are prevented and controlled; and your basic staff cover arrangements.

Please see the 'information for providers' document that we have sent you for more information.

Guidance

- Please write your response in the box above.
- We want you to let us know in practical terms what you do to make sure the service you provide is safe. You should include brief examples of how you do this.
- We would also like you to include examples of innovative practice.
- There is a 2,500 characters (NOT WORDS) limit for this question.
- Please don't include any attachments with the PIR when you submit it to us. Just describe or list the evidence you have to support your comments.
- You need to focus on the areas covered under the 'safe' question, which include how risks, premises, equipment and medicines are managed, how your location prevents and controls infection, and staff arrangements. For example when detailing how you manage risk:
 - We would like to see evidence and an explanation of how you ensure people who use your service, and your staff, are protected from unnecessary risk.
 - You should also consider how you assess risk and promote the choices of people and not deny them the opportunity to live the lives they want to lead.
- You shouldn't necessarily limit yourself to the areas covered in the lines of enquiry or prompts; you can include any other areas that show you provide a safe service

- We do not want to be prescriptive about what you should include in the PIR as this document is your opportunity to tell us what you do to provide a safe service.
- The information you include in your response may also help us understand the areas you see as important.
- It will also contribute to your own quality assurance process by demonstrating your level of awareness of the issues and what you currently do to provide a safe service.

1b. What improvements do you plan to make that will make your service more safe and when will you make them?

Guidance

- Please write your response in the box above.
- There is a 2,500 character limit for this question.
- We want to know where you think you need to improve the service to make it safer. Please consider how people are protected, how risks, premises, equipment and medicines are managed, how your location prevents and controls infection, and staff arrangements.
- Please also consider how you will continue to ensure that people's rights and choices in relation to risks will also be respected.
- You should tell us how you will make the improvements you have identified.
- You should give us a clear plan of:
 - What you are going to do.
 - Who is going to do it.
 - How it will be resourced.
 - When it will be completed.
- The information in this section is evidence that you have explored and recognised where you need to provide a better level of service.
- The detail included within this section could be used as part of your own quality assurance processes to show you are planning for the future and not relying on past success or areas you have already improved.

1c. Mental Capacity Act 2005

Guidance

- The Mental Capacity Act 2005 is an important piece of legislation that underpins how you support people who use your service, and you should have policies and procedures that ensure you are meeting the legal requirements of the Act and the associated Code of Practice.
- The Act outlines the importance of enabling people to make decisions for themselves to the maximum extent possible, acting in a person's best interests when they cannot, and the process that needs to be followed when you restrict a person's liberty.
- The questions ask whether anyone currently using your service has their freedoms, rights and choices restricted and whether this has effected how staff support them.
- Subsequent questions ask you to provide the number of people affected. If there is no one at your service that is currently affected then please enter 0.
- The Court of Protection may not have been involved in any decisions about limiting a person's rights, freedoms and choices. If this is the case, then how you manage capacity and best interest assessments may be looked at during your inspection.

1d. Drugs and medicines

Guidance

- We would like you to include the number of medicine errors that have occurred in the 12 months up to the date of this return. By a medicine error we mean when:
 - A dose has been missed.
 - Too much or too little of the medicine was given.
 - The wrong medicine was given.
 - It was given to the wrong person.
 - It was wrongly recorded.
 - It was administered in a manner that did not follow your medicines procedure or prescribing requirements.
- Section 1d(ii): a 'controlled drug' is any medicine listed under the schedules defined by the Misuse of Drugs Act 1971. By 'administer controlled drugs' we mean that you hold, store or give these to people using your service.

1e. Nutrition and hydration

Guidance

- We want you to tell us how many people are at risk of malnutrition or dehydration.
- We expect you to know this through the assessment processes you use to identify when a person is at risk.
- You could also explain in section 1a what you are doing as a service to reduce the risks associated with malnutrition and dehydration.

1f. Deaths

Guidance

- You should already have notified us about people who have died whilst receiving a service from you, as this is a statutory requirement.
- In this section, however, we would like you to tell us how many deaths in the 12 months up to the date of this return have resulted in further investigation, either by a coroner or those which have resulted in an inquest.
- Section 1(f)(iii) relates only to deaths of people subject to an authorisation to deprive them of their liberty from a Supervisory Body or the Court of Protection.

2. Information to support the question ‘Is the service effective’?

By effective, we mean that people experience the best possible health and quality of life outcomes, defined in their own terms. Please consider how your location provides effective care, how people’s needs, preferences and choices are being met, access to, and maintaining healthcare, nutrition and hydration, and home design and decoration.

Please see the ‘information for providers’ document that we have sent you for more information.

2a. What do you do to ensure the service you provide is effective?

Guidance

- Please write your response in the box above.
- There is a 2,500 characters (NOT WORDS) limit for this question.
- Please **do not** include any attachments with the PIR when you submit it to us. Just describe or list the evidence you have to support your comments.
- You need to focus on the areas covered under the ‘effective’ question. This question covers a wide range of subjects including how your location provides effective care, how people’s needs, preferences and choices are being met, access to, and maintaining healthcare, nutrition and hydration, and home design and decoration.

2b. What improvements do you plan to make that will make your service more effective and when will you make them?

Guidance

- Please write your response in the box above.
- There is a 2,500 character limit for this question.
- We want to know where you think you need to improve the service to make it effective.
- You need to focus on the areas covered under the ‘effective’ question. This question covers a wide range of subjects including how your location provides effective care, how people’s needs, preferences and choices are being met, access to, and maintaining healthcare, nutrition and hydration, and home design and decoration.

2c. End of life

Guidance

- Do Not Attempt Resuscitation (DNAR) forms should be reviewed whenever a person’s condition or wishes change.

- A 'complete' DNAR form should clearly record that the person is in agreement with the decision or, if they do not have capacity to make the decision, that it has been agreed to be in their best interests in line with the Mental Capacity Act 2005.

3. Information to support the question ‘Is the service caring?’

By caring, we mean that people are treated with kindness and compassion, and their dignity is respected. Please consider how you ensure that people are cared for properly; that their relationships with people that matter to them are supported; how privacy and dignity is respected and promoted; and the support you provide for people at the end of their lives.

Please see the ‘information for providers’ document that we have sent you for more information

3a. What do you do to ensure the service you provide is caring?

Guidance

- Please write your response in the box above.
- There is a 2,500 characters (NOT WORDS) limit for this question.
- We want you to tell what you do to make sure the service you provide is caring. You should include brief examples of how you do this.
- You need to focus on the areas covered under the ‘caring’ question including how you ensure that people are cared for properly; that their relationships with people that matter to them are supported; how privacy and dignity is respected and promoted, and the support you provide for people at the end of their lives.

3b. What improvements do you plan to make that will make your service more caring and when will you make them?

Guidance

- Please write your response in the box above.
- There is a 2,500 character limit for this question.
- You need to focus on the areas covered under the ‘caring’ question including how you ensure that people are cared for properly; that their relationships with people that matter to them are supported; how privacy and dignity is respected and promoted, and the support you provide for people at the end of their lives.

3c. Recognition/good practice

Guidance

- You should include details of when the quality of your service, or the staff you employ, has been officially recognised. This could be by other organisations or through your own internal recognition of good practice.
- You should list any awards or other acknowledgements you have received in the 12 months up to the date of this return.

- You could also include more information in section 3a, as it would be good evidence you are providing a caring service.
- Section 3c(ii): list any schemes, initiatives or networks you use or are a member of that are a positive influence on how you provide care and support.
- We would like to hear about any networks, initiatives or accreditation schemes you are involved with. This would also be a good opportunity to include more information in section 3a.

4. Information to support the question ‘Is the service responsive?’

By responsive, we mean that people get the individual support, care and treatment they need in a timely way; that they (and the people that matter to them when needed) are involved in relevant decisions, and that they are listened and responded to in a way that recognises and respects their human rights, best interests, preferences, needs and concerns. Please consider how you ensure that people receive care that is responsive to their needs; that it is consistent, co-ordinated and person-centred; how people are listened to and are supported to express their views; how concerns and complaints are responded to; and how end of life choices are known and met.

Please see the ‘information for providers’ document that we have sent you for more information.

4a. What do you do to ensure the service you provide is responsive?

Guidance

- Please write your response in the box above.
- There is a 2,500 characters (NOT WORDS) limit for this question.
- Please **do not** include any attachments with the PIR when you submit it to us.
- You need to focus on the areas covered under the ‘responsive’ question including how you ensure that people receive care that is responsive to their needs; that it is consistent, co-ordinated and person-centred; how people are listened to and are supported to express their views; how concerns and complaints are responded to; and how end of life choices are known and met.

4b. What improvements do you plan to make that will make your service more responsive and when will you make them?

Guidance

- Please write your response in the box above.
- There is a 2,500 character limit for this question.
- You need to focus on the areas covered under the ‘responsive’ question including how you ensure that people receive care that is responsive to their needs; that it is consistent, co-ordinated and person-centred; how people are listened to and are supported to express their views; how concerns and complaints are responded to; and how end of life choices are known and met.

4c. Compliments and complaints

Guidance

- All compliments and complaints included should be recorded and you should be able to show us these records and any received in writing during the inspection.
- We have used the figure of 28 days as the length of time in which a resolution to a formal complaint should be reached. If your complaints process is different, please use your timings to assess the proportion resolved.
- We recognise that high numbers of complaints may not indicate a poor service, but instead that people feel safe to give their feedback.

4d. Equality and Diversity

Guidance

- As a public body, CQC has a statutory duty in the area of diversity to:
 - Collect information.
 - Advance equality of opportunity.
 - Eliminate unlawful discrimination.
 - Foster good relationships between different groups.
- We see this section of the return as one of the main ways we can gather information to help build a national picture of ethnicity and diversity. We would appreciate your input in this valuable area.
- The information you give will provide us with a clearer understanding of the ethnicity and diversity of your service and in the country more widely.
- You could answer the questions by using the information you already hold in recruitment applications, assessments or other documentation that relates to people's ethnicity and other diverse needs.

5. Information to support the question ‘Is the service well-led?’

By well-led, we mean that the service’s leaders have created a culture that is open, fair, transparent, supportive, informed, challenging and continuously learning.

Please consider how you encourage open communication; promote a positive culture; learn from incidents and complaints; provide management and leadership of the location, staff and partnerships with agencies to ensure best practice and high quality care with responsibility and accountability.

Please see the ‘information for providers’ document that we have sent you for more information.

5a. What do you do to ensure the service you provide is well-led?

Guidance

- Please write your response in the box above.
- There is a 2,500 characters (NOT WORDS) limit for this question.
- Please **do not** include any attachments with the PIR when you submit it to us. Just describe or list the evidence you have to support your comments.
- You need to focus on the areas covered by the ‘well-led’ question, including how you encourage open communication; promote a positive culture; learn from incidents and complaints; provide management and leadership of the location, staff and partnerships with agencies to ensure best practice and high quality care with responsibility and accountability. For example, you could include information about:
 - How you assure yourself about the quality of the service.
 - How staff are trained and supervised.
 - How you ensure that the leadership of the service keeps up to date with best practice.
 - Any patterns you have noticed in the complaints you have received.

5b. What improvements do you plan to make that will make your service better led and when will you make them?

Guidance

- Please write your response in the box above.
- There is a 2,500 character limit for this question.
- You need to focus on the areas covered by the ‘well-led’ question, including how you encourage open communication; promote a positive culture; learn from incidents and complaints; provide management and leadership of the location, staff and partnerships with agencies to ensure best practice and high quality care with responsibility and accountability.

5c. Registered manager

Guidance

- You will normally need a registered manager at the service you run.
- If you are a sole provider, who owns and manages the service, you may not need to have a separate registered manager. If this is the case then there is no need to answer the additional questions.

5d. People who currently use your service

Guidance

- You should include the number of people who are using your service on the day the PIR is completed.
- For respite admissions, please include the number of admissions for respite in the last 12 months. If someone has used the service for more than one period of respite, please include each stay in the total.
- Please provide the number of people who use your service who pay you for all, or some, of their own care. You should know this information from the contract and invoicing arrangements you have in place.
- Please include the number of people who are funded by either the local authority or the NHS.
- If you do not know whether somebody is fully funded by either body, please do not include them in your totals.

5e. Organisations that commission your service

Guidance

- You should include the contact details of organisations that commission care and support for people at your service. We may contact them to seek their views of your service.
- We would like the details of up to six commissioning organisations.
- If your service currently has more than six commissioners then we would like the details of the organisations that commission services for most people.
- If your service currently has less than six organisations then we would like the details of them all.
- We would also like you to tell us how many people each commissioner has asked you to support. This will help us understand the relative size of the organisations that commission services from you.

5f. Skills for Care NMDS-SC return

Guidance

- If you have completed the National Minimum Data Set for Social Care (NMDS-SC) and given permission for information to be shared with CQC then you will not need to complete any further questions in Section 5.
- If this information is not up to date, accurate and complete, then please complete the staffing questions.
- If you have not completed the NMDS-SC, or have not given permission for information to be shared with CQC, then you need to complete all the questions.
- More information about the NMDS-SC can be found at the Skill for Care website.

5g. Staffing

Guidance

- You should give the total number of people you employ, not the hours worked or whole time equivalent figures.
- The questions are the same as the NMDS-SC, as we want to gather the same information to support inspection activity and not to ask you for the information twice.

5h. Staff training and qualifications

Guidance

- Please enter the number of staff that have completed training in the areas listed in the last 24 months.
- We recognise that not all training is relevant to all services. Please enter N/A for training that is not applicable to your service.
- Section 5j(iv): For other training that is not listed, please give the title of the training and the proportion of staff who have taken part.
- If there is not enough space to add all the training, you could refer to the additional training provided in your response to 5a.

5i. Staff Supervision

Guidance

- By supervision, we mean the process where a member of staff has the responsibility for providing guidance and support to another (usually more junior) employee.

- All staff should have a named person who performs this role. Supervision can be performed in a number of different ways but is normally on a one-to-one basis or in a group setting.
- Appraisals are normally undertaken every 12 months for staff but in this question we have than recognised the staff concerned must have been employed for more than two years to allow the appraisal process to be fully established.
- A response of 100% would be expected if the appraisal process is working well

6. Additional question for providers with more than one location

Guidance

- We would like to know about the support you receive from the senior management of the organisation which your service is part of.
- This should be recorded as the number of visits to specifically assess the quality of your service which have taken place.
- Only include visits by senior managers who:
 - Talked to people using services.
 - Toured the premises.
 - Undertook a professional, formal assessment of the quality of the service.
- Ad-hoc visits that were brief, office-based and did not provide any assessment of quality should not be included.
- Details of these visits should be included in section 5a to increase the evidence that your service is well-led.