



How to complete the provider information return (PIR):

Community services

April 2015

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Purpose

On 1 October 2014, we launched our new approach to regulating and inspecting adult social care services. To understand more about why, how and what we have changed, and our priorities and principles, please go to our [webpage](#) to access the Provider Handbooks and appendices we have published.

This Provider Information Return (PIR) is an important element of our new inspection process. Under Regulation 17(3) of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014, we are asking you to provide us with data, and some written information, that answer the questions:

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

The PIR is a pre-inspection questionnaire and it will help us to plan our inspection of your service. Inspectors will use this information to help decide the areas they wish to look at in more detail during their visit. Providers are encouraged to be concise in their answers, as we are seeking a snapshot of your service rather than a comprehensive view.

The PIR will help you to understand the areas we may look at during our visit, and to provide you with the opportunity to reflect on what you do well for people using services under each of the key questions. We hope the PIR will also add value to your existing quality assurance processes.

Please complete the form and return it to us by the deadline stated in the email to you. We have found that the average time it takes for providers to complete the PIR for the first time is about one and a half to two working days, so some planning may be required to make sure the form is completed on time. If it is not completed and returned to us by the deadline, inspectors will not normally award a rating better than 'Requires Improvement' for Well-Led. Inspectors can, however, use their judgement to recognise exceptional circumstances that suggest when a different rating is appropriate.

The date you receive or return this form will not determine the date we visit your service.

Some of the content you provide may also be used to inform national reporting such as the State of Care report or thematic reviews. When used in this way, it will not be attributed to any provider.

The information you provide is considered lawful under the Data Protection Act 1998. Disclosure of this information is necessary to help us exercise our statutory functions (in accordance with paragraph 5(b) of schedule 2 of the Act).

Completing the return

- To use this form, please click on the hyperlink we emailed you. You must be connected to the internet when filling it in, saving or submitting the form.
- The PIR is arranged under the five key question areas (safe, effective, caring, responsive and well-led).
- Further information about the five questions can be found in the 'Community adult social care services [provider handbook](#)' and [appendices](#) which contain the Key Lines of Enquiry and Characteristics of ratings. It is recommend that you read these to have a fuller understanding of what the five questions mean, and what we would like you to focus on in your response.
- You should make your answers as concise and clear as possible. We encourage you to use bullet points to help you do this.
- For each of your free text responses, you should include examples of evidence to support what you have written.
- Please limit your answer to 500 words in the free text boxes.
- Some questions are mandatory, these are shown by a * at the beginning of a question. These need to be completed otherwise the form will not submit.
- Please put N/A in mandatory text boxes or '0' in numeric mandatory questions that follow on from a question that you are not required to fill in otherwise the form will not submit.
- The questions in the data sections ask you for simple responses predominantly in the form of a number, date or a yes/no confirmation.
- You will find that some responses to questions will be pulled through to form part of another question.
- Also, you will find that some questions that appear in the guidance will not appear in the PIR. This is because the PIR will not display questions you do not need to answer based on how you have answered other questions earlier in the form.
- Do **not** use spaces when inserting telephone numbers.
- To exit the form before completion, use the 'Save & Exit' button which is located at the bottom of each page. You will be asked if you want the link to the form to be emailed to you, if so please complete your email address in the box. You will receive a message "Your email reminder has successfully been sent".
- Clicking on the 'Finish' button will automatically submit the return to CQC. When submitted a message will pop up saying "Thank you for taking part in the survey". You will receive a confirmation that your submission has been received by CQC and an individual reference number will be emailed to you. Please check your spam/junk if you do not receive an email.
- A summary of responses that you have provided in the Provider Information Return (PIR) will be emailed to you for your information.
- 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. Answering these questions as fully as possible will help us to improve the PIR.
- There is a declaration that must be completed before you submit the PIR. Please ensure that
- You must complete and submit the PIR before the deadline date otherwise the information you have entered previously may be lost.
- Once you have completed and returned the form, we may contact you to ask additional questions to clarify your answers or to provide further detail.

If you have any questions about filling in or submitting the PIR, please read the relevant section in the guidance document. Please contact ascinspections@cqc.org.uk if you cannot find the answer there.

Information about the service and the person completing the PIR

All questions on this form relate to the service you provide for people receiving regulated activities, such as personal care and to staff and other people delivering regulated activities. Regulated activities are those listed in Schedule 1 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 for which you are registered. Do not include any information about people and staff who do not receive or deliver regulated activities.

Your Service:

Guidance

If any of the information within this section has changed then you must send us a notification using our standard form for this. Please go to www.cqc.org.uk/content/notifications-non-nhs-trust-providers for the form and further information.

Number of people using your service

Guidance

- You should include the number of people who are using your service on the day the PIR is completed.

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 this information to be shared with CQC then you may not need to complete some questions about staffing on the PIR. This will depend on whether you declare this information to be accurate and complete.
- Where you do not have to complete these questions, they will not appear in your PIR form.
- 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.

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 abuse and avoidable harm.

In **community care**, this means that people are supported to make choices and take risks and are protected from physical, psychological and emotional harm, abuse, discrimination and neglect.

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- Tell us, in practical terms, what you do to make sure the service you provide is safe. You should provide brief examples of how you do this, including your main improvements over the last 12 months.
- Please also include examples of good and innovative practice.
- When submitting the PIR, please don't include any attachments. 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 service prevents and controls infection; and staff arrangements. For example, when detailing how you manage risk:
 - Provide evidence and an explanation of how you make sure that people who use your service, and your staff, are protected from unnecessary risk.
 - You should also consider how you assess risk, and how you promote the choices of people and don't deny them the opportunity to live their lives as they wish.
- Please refer to the provider handbook and appendices for more information on the areas you could consider in answering this question.
- You don't need to 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. 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 introduce in the next 12 months that will make your service safer, and how will these be introduced?

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- Tell us where you think you need to improve your service to make it safer. Please consider: how people are protected; how risks, premises, equipment and medicines are managed; how your service 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.
- Tell us how you will make the improvements you have identified.
- You should give us a concise 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 gives us evidence that you have explored and recognised where you need to provide a better level of service.
- The detail provided in this section could also be used as part of your own quality assurance processes. It will show that you are planning for the future and not relying on past success or areas you have already improved.

1c. Staffing levels

Guidance

- This set of questions will not appear in the PIR if you answered the questions at the front of the form to say that you have completed the National Minimum Data Set for Social Care (NMDS-SC), given permission for this information to be shared with CQC, and that it is accurate and complete.
- When we refer to people in the first question, this would include permanent + temporary employees, + apprentices directly employed + pool + agency + students + voluntary + apprentices not directly employed + 'other' who support the delivery regulated activities.
- When we refer to staff in the questions, this means permanent and temporary employees who provide regulated activities.

1d. Drugs and medicines

Guidance

- We would like you to include include the number of medicines errors that have occurred in the 12 months up to the date of this return. By a medicines 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 way that did not follow your medicines procedure or prescribing requirements.
- 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.

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

By **effective**, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

In **community care**, this means that people are supported to live their lives in the way that they choose and experience the best possible health and quality of life outcomes.

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

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- The guidance for 1a is relevant to this question.
- You need to focus on the areas covered under the ‘effective’ question. This includes: how your service provides effective care; how people’s needs, best interests, preferences and choices are being met; access to, and maintaining healthcare, nutrition and hydration; and home design and decoration.
- Please refer to the provider handbook and appendices for more information on the areas you could consider in answering this question.

2b. What improvements do you plan to introduce in the next 12 months that will make your service more effective, and how will these be introduced?

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- The general guidance on answering the key questions described in 1b above also applies to 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 includes: how your service 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. Staff training and qualifications

Guidance

- This set of questions will not appear in the PIR if you have answered the questions at the front of the form to say that you have completed the National Minimum Data Set for Social Care (NMDS-SC), given permission for this information to be shared with CQC, and that it is accurate and complete.
- For the staff induction question, the Skills for Care Common Induction Standards are being replaced by the Care Certificate from April 2015 which covers both care assistants and support workers across the health and social care sector. During this transition period, we would like to capture the number of staff who have completed one or other of these. More information about the new Care Certificate can be found on the Skills for Care website.
- 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 '0' for training that is not applicable to your service.
- For other training that is not listed, please give the title of the training and the number 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 2a.

2d. Staff supervision

Guidance

- By supervision, we mean where a member of staff is responsible for providing guidance and support to another 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 for staff are normally undertaken every 12 months, but in this question we recognise that the staff concerned must have been employed for more than two years to allow the appraisal process to be fully established.

2e. 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. You should have policies and procedures in place to ensure that you are meeting the legal requirements of the Act and the associated Code of Practice.
- The Act outlines the importance of helping people to make decisions for themselves as much as 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 asks whether anyone currently using your service has their freedoms, rights and choices restricted, and whether this has affected 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.

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

By **caring**, we mean that staff involve and treat people with compassion, kindness, dignity and respect.

In **community care**, this means that people, their families and carers experience care that is empowering and provided by staff who treat people with dignity, respect and compassion.

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

Guidance

- Please write your response in the box.
- Please limit your response to 500 words
- The general guidance on answering the key questions described in 1a above also applies to this question.
- We want you to tell us 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. This includes: how you make sure 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 refer to the provider handbook and appendices for more information on the areas you could consider in answering this question.

3b. What improvements do you plan to introduce in the next 12 months that will make your service more caring, and how will these be introduced?

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- The general guidance on answering the key questions described in 1b above also applies to this question.
- You need to focus on the areas covered under the ‘caring’ question. This includes: how you make sure 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.
- 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. For example, the Social Care Commitment, SCIE, NICE, or Skills for Care.
- We would like to hear about any networks, initiatives or accreditation schemes you are involved with.
- We would like to hear about how you ensure your service and staff keep up to date with good practice. Examples could include being a part of schemes and membership bodies, developing or participating in training with other organisations, and what you might do internally such as having designated champions or implementing staff learning sets.

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

By **responsive**, we mean that services are organised so that they meet people’s needs.

In **community care**, this means that people get the care they need, are listened to and have their rights and diverse circumstances respected.

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

Guidance

- Please write your response in the box.
- Please limit your text to 500 words.
- The general guidance on answering the key questions described in 1a above also applies to this question.
- You need to focus on the areas covered under the ‘responsive’ question. This includes: how you make sure 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 refer to the provider handbook and appendices for more information on the areas you could consider in answering this question.

4b. What improvements do you plan to introduce in the next 12 months that will make your service more responsive, and how will these be introduced?

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- The general guidance on answering the key questions described in 1b above also applies to this question.
- You need to focus on the areas covered under the ‘responsive’ question. This includes: how you make sure 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 you reference 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 for a resolution to a formal complaint will be measured against. Please use this time frame to assess the number of complaints resolved even if your complaints process resolution period is different.
- We recognise that high numbers of complaints may not indicate a poor service, but rather 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 equality and diversity. We would appreciate your input in this valuable area.
- The information you give will provide us with a clearer understanding of the work on equality and diversity of your service and across the country.
- You could answer the questions by ticking if you have specific policies and/or carried out any work in relation to areas such as recruitment, staff training, and operational practices to see if they promote equality, diversity and human rights.

4e. Service user bands

Guidance

- We would like to record the number of people who use your service using these bandings. The bandings are those used in applications for registration.
- For the bandings that capture people's needs, please select all bandings that apply to each person using your service.

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

By **well-led**, we mean that the leadership, management and governance of the organisation assure the delivery of high-quality, person-centred care, supports learning and innovation, and promotes an open and fair culture.

In **community care**, this means that management and leadership encourage and deliver an open, fair, transparent, supporting and challenging culture at all levels.

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

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- The general guidance on answering the key questions described in 1a above also applies to this question.
- You need to focus on the areas covered by the ‘well-led’ question. This includes: how you encourage open communication; promote a positive culture; learn from incidents and complaints; provide management and leadership of the service, 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 make sure that the leadership of the service keeps up-to-date with best practice.
 - Any patterns you have noticed in the complaints you have received.
- You may also wish to reflect on how you will meet the Fit and Proper Person requirements for directors (should this be applicable).
- Please refer to the provider handbook and appendices for more information on the areas you could consider in answering this question.

5b. What improvements do you plan to introduce in the next 12 months that will make your service better led, and how will these be introduced?

Guidance

- Please write your response in the box.
- Please limit your response to 500 words.
- The general guidance on answering the key questions described in 1b above also applies to this question.
- You need to focus on the areas covered by the ‘well-led’ question. This includes: how you encourage open communication; promote a positive culture; learn from

incidents and complaints; provide management and leadership of the service, 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.

5d. Payment for the care you provide

- 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 funded by either body, please do not include them in your totals.

5e. Organisations who 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. Organisations could include local authorities, NHS, charities, and so on.
- Please provide details of the ten main commissioning organisations for your service.
- If your service currently has more than ten commissioners, please provide details of the organisations that commission services for the most people.
- If your service currently has less than ten organisations, please provide details for all of them.
- Please 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. Staff departures

- This set of questions will not appear in the PIR if you have answered the questions at the front of the form to say that you have completed the National Minimum Data Set for Social Care (NMDS-SC), given permission for this information to be shared with CQC, and that it is accurate and complete.
- Please select a single reason for each person who has left.

5g. Domiciliary care agencies – service provision

Guidance

- This set of questions is for domiciliary care agencies only.
- If you have answered 'No' to question 5g(i) you will be taken straight to question 5(i).
- You should include the number of people who are using your service on the day the PIR is completed. Only count the number of people receiving a regulated activity such as personal care.
- Some of the questions in this section may also assist CQC with national reporting.

5h. Domiciliary care agencies – premises

Guidance

- This set of questions is for domiciliary care agencies only.
- This question will not appear if you have answered 'No' to question 5g(i).
- Please tell us about where any of your satellite offices are located.
- By 'satellite office', we mean somewhere that staff operate from, a place where you hold records, or a location with a telephone number and address that is used for the running of the business.

5i Supported living services - service provision

Guidance

- This set of questions is for supported living services only.
- If you have answered 'No' to question 5i(i) you will be taken straight to question 5k.
- By 'supported living' we mean where a person owns, or has a valid tenancy to occupy, their own home, and receives personal care and/or support in order to promote their independence from a provider who is separate to their housing provider.
- You should include the number of people who are using your service on the day the PIR is completed. Only count the number of people receiving a regulated activity such as personal care.
- If you do not provide supported living services, please answer '0' to any mandatory questions in this section.

5j. Supported living services - premises

Guidance

- This set of questions is for supported living services only.
- This question will not appear if you have answered 'No' to question 5i(i).
- Please tell us about any supported living services that you run.
- You should include the number of people who are using your service on the day the PIR is completed. Only count the number of people receiving a regulated activity such as personal care and have a valid tenancy agreement to occupy the property as their own home.
- There are a number of questions we ask about your premises. Some of this information will help us to gather a national picture of the number of premises that provide supported living services.

5k. Monitoring care practice

Guidance

- Please tell us about and quality assurance visits management make to observe practice and care.
- By a 'quality assurance visit', we mean a visit undertaken by the management of the service to directly observe care practice and to discuss the care being provided with the person receiving the service.
- You should provide evidence about how you know that the care and support being provided is of good quality.

6. Additional question for providers with more than one location included in their conditions of registration

Guidance

- We would like to know about the support you receive from the senior management and/or internal quality auditors of the organisation which your service is part of.
- This should be recorded as the number of visits that have taken place to specifically assess the quality of your service.
- Only include visits by senior managers or auditors 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.