

Question	Evaluation or information
<p>Step 1: Information</p> <p>The CareMatch Portal is the system by which providers wishing to provide home support, supported living, residential care (including nursing) services to Birmingham citizens apply to join the Flexible Contracting Arrangement or Framework Agreement necessary to do so. Details of Flexible Contracting Arrangements or Framework Agreements that are currently open for tenders are shown below:</p>	
List of tender and contract documents available by clicking on each contract tile.	Information
<p>Step 2: Owner Details</p> <p>Welcome to CareMatch, the system to match quality care for adults across Birmingham.</p> <p>To register your interest in providing care services to adults within Birmingham, please complete the following details.</p>	
Are you a Care Quality Commission registered provider?* / Non-CQC Regulator*	pass / fail
CQC Provider ID Search* / Non-CQC Registration ID*	pass / fail
Name of Provider*	pass / fail
CQC ID* / Non-CQC Registration ID*	pass / fail
Website	Information
Contact Number	Information
Address Line 1*	pass / fail
County	Information
Address Line 2	Information
Region	Information
Town/City	Information
Provider Postcode*	pass / fail
<p>User Registration</p>	
First Name*	Information
Family Name*	Information
Contact Number*	Information
Role*	Information
Email *	Information
Confirm email*	Information
Password*	Information
Confirm password*	Information

Step 3: Owner application	
In order to process and approve your registration, we need you to complete the following application. The application has been broken down into sections, and you can see your progress on each section below.	
Insurance documents	
Please answer the questions below. Questions marked with * are mandatory.	
Please provide proof of Employers Liability (including volunteers) Insurance - to a minimum level in accordance with statutory legislation (currently £5m) and upload your certificate or Summary of Cover document here. If the insurance expires between now and the contract award date then you will need to provide the new certificate as soon as it is available. If the application is closed then we will request it during the evaluation period with a set date to return it by.*	pass / fail
Please provide proof of Public Liability Insurance (including loss or damage to service user's personal effects) - to a minimum level of £10m and upload your insurance certificate or Summary of Cover document here. If the insurance expires between now and the contract award date then you will need to provide the new certificate as soon as it is available. If the application is closed then we will request it during the evaluation period with a set date to return it by.*	pass / fail
Insurance documents - Nursing homes	
Please answer the questions below. Questions marked with * are mandatory.	
(Nursing Homes only) Please provide proof of Insurance for Professional Indemnity, Treatment Cover, and Negligence to a minimum level of £5m and upload your insurance certificate or Summary of Cover document here. If the insurance expires between now and the contract award date then you will need to provide the new certificate as soon as it is available. If the application is closed then we will request it during the evaluation period with a set date to return it by.	Not applicable
General company information	
Please answer the questions below. Questions marked with * are mandatory.	
What is your Trading Status?*	pass / fail
If "Other" please specify*	pass / fail
Date of registration (if applicable) or date of formation.*	Information
Company Registration Number*	pass / fail
Company House Registered Name*	pass / fail
Registered VAT Number*	pass / fail

Registered Charity Number (if applicable)*	pass / fail
Registered Charity Name*	pass / fail
Relevant classifications (state whether you fall within one of these, and if so which one)*	Information
Are you a small, medium or micro enterprise (SME)?*	Information
Are you registered with the appropriate professional or trade register(s) specified for this procurement in the country where your organisation is established? Please hover over question guidance for further details.*	Information
If you responded yes to the above question, please provide the relevant details, including the name of the register and registration number(s), and if evidence of registration is available electronically, please provide: - the website address - issuing body - reference number.	Information
For procurements for services only, is it a legal requirement in the country where you are established for you to: a) possess a particular authorisation, or b) be a member of a particular organisation, to provide the requirements specified in this procurement?*	Information
If you responded yes to the above question, please provide additional details of what is required, confirmation that you have complied with this and, if evidence of compliance is available electronically, please give the website address, issuing body and reference number.*	Information
Full name of your immediate parent company*	Information
Registered or head office address of your immediate parent company*	Information
Registration number of your immediate parent company*	Information
VAT number of your immediate parent company*	Information
Persons of significant control (PSC):	
Please answer the questions below. Questions marked with * are mandatory.	
Please confirm if your company has a person or person's of significant control (PSC) where appropriate?*	Information
Name of PSC*	Information
Date of Birth of PSC*	Information
Nationality of PSC*	Information
Country where PSC usually lives*	Information
Date they became a PSC in relation to the company*	Information
Service address*	Information
Which conditions for being a PSC are being met:*	Information
Step 4: Provider Contracts	

Please select the Contract and Specialisms from below.	pass / fail
Step 5: Provider details	
To register details of your service(s), please complete the following location details.	
Are you a Care Quality Commission registered location?* / Non-CQC Regulator*	pass / fail
CQC Location ID Search* / Non-CQC Registration ID*	pass / fail
Location name*	pass / fail
Address Line 1*	pass / fail
County	Information
Address Line 2	Information
Region	Information
Town/City	Information
Provider Postcode*	pass / fail
Website	Information
CQC Rating*	pass / fail
Name of person submitting bid*	Information
Role of person submitting bid*	Information
Email address of person submitting bid*	Information
Please confirm the email address of person submitting bid*	Information
Contact Number of bid submitter*	Information
Email address for referrals.*	Information
Confirm email address for referrals.*	Information
Step 6: Provider Application	
In order to process and approve your registration, we need you to complete the following application. The application has been broken down into sections, and you can see your progress on each section below.	
Home Support for Children and Young People with Disabilities and Home Support for Adults	
Please select your first area choice*	Allocation
Please select your second area choice*	Allocation
Please tick to confirm that you are aware that if you wish to provide services to children, your location's CQC registration must include "Caring for children (0 - 18yrs)" as a specialism/service.*	pass / fail
Quick Discharge Service	
Please state the number of care workers currently working at the Provider location named in this application?*	pass / fail

Can you provide a Quick Discharge Service (QDS) and Quick Intervention Service (QIS) to all Birmingham citizens in accordance with the Service Specification (when required to do so)?*	pass / fail
Do you agree to putting in place an 'out of hours' provision in accordance with the Service Specification to ensure that authorised staff can make referrals outside of 'office hours'?*	pass / fail
Can you establish a separate workforce at commencement of the contract for this service?*	pass / fail
Do you agree to putting in place a workforce development programme - including additional training to ensure the Quick Discharge Service Specification can be met?*	pass / fail
Please complete and upload the tender Method Statement template addressing how you will meet the requirements of the Service Specification. The Method Statement template and Service Specification can be found in the document list on the following page under the heading Quick Discharge Service; https://www.carematchportal.com/carematch/PreRegistration.aspx *	PART 3 pass / fail PART 4 Scored evaluation
Payment Information	
Please answer the questions below. Questions marked with * are mandatory.	
Account Number*	Information
Sort Code*	Information
Account Name*	Information
Bank Name*	Information
Bank Address*	Information
Grounds for Exclusion	
The detailed grounds for exclusion of an organisation are set out on this web page: www.gov.uk/government/uploads/system/uploads/attachment_data/file/551130/List_of_Mandatory_and_Discretionary_Exclusions.pdf which should be referred to before completing these questions.	
Within the past five years, anywhere in the world, have you or any person who is a member of the supplier's administrative, management or supervisory body or who has powers of representation, decision or control in the supplier, been convicted of any of the offences within the summary below:	
Please answer the questions below. Questions marked with * are mandatory.	
Participation in a criminal organisation*	pass / fail
Corruption*	pass / fail
Terrorist Offences or offences linked to terrorist activities*	pass / fail
Money Laundering or Terrorist financing*	pass / fail
Child Labour and other forms of trafficking human beings*	pass / fail

Any other offence within the meaning of Article 57(1) of the Directive as defined by the law of any jurisdiction outside England, Wales or Northern Ireland.*	pass / fail
Any other offence within the meaning of Article 57(1) of the Directive created after 26th February 2015 in England, Wales or Northern Ireland.*	pass / fail
If you have answered "Yes" to any of the questions on exclusion grounds please provide further details, including: - the date of conviction and the jurisdiction - which of the grounds listed the conviction was for - the reasons for the conviction - the identity of the person who has been convicted*	pass / fail
If the relevant documentation is available electronically please provide: - the web address - the issuing authority - the precise reference of the documents*	pass / fail
If you have answered "Yes" to any part of the questions on exclusion grounds please explain what measures have been taken to demonstrate your reliability despite the existence of relevant grounds for exclusion (Self cleaning)*	pass / fail
<p>Grounds for exclusion relating to the payment of taxes and social security contributions</p> <p>The detailed grounds for exclusion of a supplier for non-payment of taxes and social security contributions, are set out on this webpage, and should be referred to before completing these questions.</p> <p>For further information see: www.gov.uk/government/uploads/system/uploads/attachment_data/file/551130/List_of_Mandatory_and_Discretionary_Exclusions.pdf</p> <p>Please answer the questions below. Questions marked with * are mandatory.</p>	
<p>Please confirm that you have met all your obligations relating to the payment of taxes and social security contributions, both in the country in which you are established and in the UK.</p> <p>If documentation is available electronically please provide:</p> <ul style="list-style-type: none"> ● The web address ● Issuing authority ● Precise reference of the documents* 	pass / fail

<p>If you have answered "No" to the above question please provide further details including the following:</p> <ul style="list-style-type: none"> ● Country concerned ● The amount concerned ● How the breach was established, i.e. through a judicial or administrative decision or by other means ● If the breach was established through a judicial or administrative decision please provide the date of the decision ● If the breach was established by other means please specify the means* 	pass / fail
<p>Please also confirm whether you have paid, or have entered into a binding arrangement with a view to paying, the outstanding sum including, where applicable, any accrued interest and/or fines.*</p>	pass / fail
<p>Further Grounds for Exclusion</p> <p>The detailed grounds for exclusion of an organisation are set out on this webpage, and should be referred to before completing these questions.</p> <p>For further information see: www.gov.uk/government/uploads/system/uploads/attachment_data/file/551130/List_of_Mandatory_and_Discretionary_Exclusions.pdf</p> <p>Within the past three years, anywhere in the world, have any of the situations summarised below and listed in full on the webpage applied to you or your organisation?</p> <p>Please answer the questions below. Questions marked with * are mandatory.</p>	
<p>Prior performance issues? This includes significant or persistent deficiencies in the performance of a substantive requirement under a prior public contract, a prior contract with a contracting entity, or a prior concession contract, which led to early termination of that prior contract, damages or other comparable sanctions.*</p>	pass / fail
<p>If you have answered "Yes" to the question above, please explain what measures have been taken to demonstrate the reliability of the organisation despite the existence of a relevant ground for exclusion? (Self-Cleaning)*</p>	pass / fail
<p>Breach of environmental obligations? *</p>	pass / fail
<p>Breach of social law obligations?*</p> <p>For this type of contract social law obligations would include, but not be limited to, engaging the use of illegal immigrants or slave labour. Due care and attention must be given to environmental risks effecting the safety of the citizen in their home environment and alerting the appropriate person where a risk is identified.</p>	pass / fail
<p>Breach of labour law obligations? *</p>	pass / fail
<p>Bankruptcy or subject of insolvency?</p>	pass / fail
<p>Guilty of grave professional misconduct?*</p>	pass / fail

Distortion of competition?*	pass / fail
Aware of any conflict of interest within the meaning of Regulation 24 due to the participation in the procurement procedure?*	pass / fail
Been involved in the preparation of the procurement procedure?*	pass / fail
You have been guilty of serious misrepresentation in supplying the information required for the verification of the absence of grounds for exclusion or the fulfilment of the selection criteria*	pass / fail
The organisation has withheld information required for the verification of the absence of grounds for exclusion or the fulfilment of the selection criteria.*	pass / fail
The organisation has influenced the decision-making process of the contracting authority to obtain confidential information that may confer upon the organisation undue advantages in the procurement procedure, or to negligently provide misleading information that may have a material influence on decisions concerning exclusion, selection or award.*	pass / fail
If you have answered "Yes" to any part of the questions on exclusion grounds please explain what measures have been taken to demonstrate your reliability despite the existence of relevant grounds for exclusion (Self cleaning)*	pass / fail
Economic and Financial Standing	
Please answer the questions below. Questions marked with * are mandatory.	
Please provide a copy of your detailed accounts for the last two years (audited if required by law).*	pass / fail
If you have your last two years of accounts please also complete and upload the financial spreadsheet with information of the last two years.*	pass / fail
If you can not provide a copy of your accounts for the most recent two years, please provide one of the following for the most recent year(s) of trading: - Statement of the Turnover, Profit and Loss Account - Income Statement, Balance Sheet - Statement of Financial Position and Statement of Cash Flow.*	pass / fail
If you can not provide a copy of your accounts for the most recent two years, please also provide a bank letter outlining the current cash and credit facility position.*	pass / fail
Requirements under Modern Slavery Act 2015	
Please answer the questions below. Questions marked with * are mandatory.	
Are you a relevant commercial organisation subject to Section 54 of the Modern Slavery Act 2015? Please note that you are if you carry on your business, or part of your business in the UK, supplying goods or services and you have an annual turnover of at least £36 million.*	pass / fail

If you are a relevant commercial organisation (with an annual turnover of at least £36 million) confirm that you have published a statement that complies with the requirements of Section 54 of the Modern Slavery Act.*	pass / fail
Please select "not applicable" if this question does not apply to your organisation.	
If you have answered yes to having a published statement, please provide: <ul style="list-style-type: none"> ● the web address ● precise reference of the documents* 	pass / fail
Please answer N/A if this question does not apply to your organisation.	
If you are a relevant commercial organisation but do not have a published statement, please explain what measures have been taken to demonstrate your reliability despite the existence of a relevant ground for exclusion (Self cleaning)*	pass / fail
Please answer N/A if this question does not apply to your organisation.	
Social Responsibility	
Please answer the questions below. Questions marked with * are mandatory.	
Has your organisation or any of its Directors or Executive Officers been in receipt of enforcement/remedial orders in relation to the Health and Safety Executive (or equivalent body) in the last 3 years?*	pass / fail
In the last three years, has any finding of unlawful discrimination been made against your organisation by an Employment Tribunal, an Employment Appeal Tribunal or any other court (or in comparable proceedings in any jurisdiction other than the UK)?*	pass / fail
In the last three years, has your organisation had a complaint upheld following an investigation by the Equality and Human Rights Commission or its predecessors (or a comparable body in any jurisdiction other than the UK), on grounds of alleged unlawful discrimination?*	pass / fail
In the last three years, has your organisation been convicted of an offence, or been issued with an improvement notice, or an enforcement notice, or an order by the Environment Agency or any other enforcement body responsible for protecting the environment (including a planning authority in respect of breach of planning control)?*	pass / fail
If your answer to any questions above was "Yes", please provide a summary of the nature of the investigation and an explanation of the outcome of the investigation to date. Please include steps you have taken to prevent reoccurrence of the problem.	pass / fail
POLICIES	
Please answer the questions below. Questions marked with * are mandatory.	

<p>Please tick to confirm that your organisation has a recent Recruitment, Selection and Induction Policy that includes the following:</p> <ul style="list-style-type: none"> - employment history - at least two references (inc: most recent employer) - all workers have a current satisfactory enhanced Disclosing and Barring Service check (DBS) - risk assessments in place for positive DBS checks - right to work checks - completed application forms - interview question schedule - contract of employment - copies of qualification certificates held on file - compliance with Equality Act 2010* 	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Training Programme or a Staff Training Policy. The policy must include the following:</p> <ul style="list-style-type: none"> - Induction - Safeguarding - Moving & Handling - Health & Safety - Medication administration - First Aid - Food Hygiene - Equality/Diversity - Communication - Person Centred Care - Managing Challenging Behaviour* 	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Medication Policy. The policy must include the following:</p> <ul style="list-style-type: none"> - safe handling and administration of medication - medication review periods - when and where to seek advice - actions required when medication errors occur - medication waste management * 	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Care Planning Policy. The policy must “include the reasons why care plans are put into place” and “what care plans are for” *</p>	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Risk Assessment Policy. The policy must “include the reasons why risk assessments are put into place” and “what risk assessments are for”*</p>	<p>pass / fail</p>

<p>Please tick to confirm that your organisation has a recent General Data Protection Regulations Policy. The document must include the following provisions (if applicable to your organisation) If any of the following provisions do not apply to your organisation please state clearly in your General Data Protection Policy as to why that is the case:</p> <ul style="list-style-type: none"> - Data Protection Policy and Guidelines - Agreements with sub-contractor(s) - Staff Training Policy and Training Package - Records of staff trained - Confidentiality statement in contract of employment - Staff vetting process; DBS Check Policy - CCTV Notification (ICO) - CCTV Privacy Impact Assessment - Loss of Equipment Policy - Disclosure Policy - Physical Security Policy - Confidential Waste Policy - Destruction of Electronic Equipment Policy - Existence of contracts with confidential waste suppliers and certificates of assurance - Asset Register List - System Inventory List - IT Security Policy - Password Protection Policy - Internet and Email Use Policy - Fax and Postal Policy - Flexible and Remote Working Policy - Transferring Data Outside of UK Policy - Monitoring System Policy - Information Labelling Policy 	<p>pass / fail</p>
<p>Please tick to confirm that your organisation is registered with the Information Commissioner's Office (ICO)*</p>	<p>pass / fail</p>
<p>Please provide your ICO Registration Number*</p>	<p>pass / fail</p>
<p>Please tick to confirm which standard you have been awarded in relation to the Data Security and Protection Toolkit. If you do not have a standard, or are currently "working towards standards", then you must commit to achieve the following DSPT compliance within 12 months of the contract award: 'STANDARDS MET'*</p>	<p>pass / fail</p>

<p>The Provider agrees and acknowledges that by submitting an on-line tender, and if successful in that tender application and is awarded a contract; within six months of the contract award (unless arrangements are already in place) the Provider will be using secure email, either via a service-based NHS email account or with their own accredited system (a system which has been accredited as secure with NHSX). Please tick the box to confirm you have understood this requirement.*</p>	<p>pass / fail</p>
<p>The Provider agrees and acknowledges that by submitting an on-line tender and if successful in that tender application and is awarded a contract; within twelve months of the contract award (unless arrangements are already in place) the Provider will be using a Digital Social Care Record. Please tick the box to confirm you have understood this requirement.*</p>	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Safeguarding Policy that includes the following:</p> <ul style="list-style-type: none"> - physical abuse policy - sexual abuse policy - psychological abuse policy - financial abuse policy - neglect policy - institutional and discriminatory abuse policy - Care Act 2014 - Deprivation of Liberty Safeguards - The Human Rights Act 1998 - The Mental Health Act 2005 - Modern Day Slavery Act 2015.* 	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Business Continuity Policy that includes the following:</p> <ul style="list-style-type: none"> - Utility failure continuity plan - Premises failure continuity plan - Premises fire continuity plan - IT failure continuity plan - Inclement weather continuity plan, including how you will continue to deliver care/ensure service users are safe in the event of inclement weather - Details of how you will ensure continuity of service where employees are unavailable e.g. sickness absence, flu outbreak, major traffic or police incidents - How you will use other staff/agencies if necessary to ensure continuity of care * 	<p>pass / fail</p>

<p>Please tick to confirm that your organisation has a recent Equal Opportunities Policy that includes the following:</p> <ul style="list-style-type: none"> - Race - Colour - Nationality - Ethnic or national origin - Sex - Marital status or caring responsibility - Sexual orientation - Age - Physical - Sensory or learning disability - Mental health - Political or religious beliefs - Class - HIV status - Employment status - Unrelated criminal convictions - Union activities - The Equality Act 2010 * 	<p>pass / fail</p>
<p>Please tick to confirm that your organisation has a recent Environmental / Sustainability Policy that includes the following:</p> <ul style="list-style-type: none"> - reducing their carbon footprint - recycling - becoming paperless. * 	<p>pass / fail</p>
<p>Please tick to confirm that you commit to paying all members of staff the Birmingham Care Wage and will continue to ensure all staff are paid in line with the Birmingham Care Wage throughout the life of the contract. (Please note the Birmingham Care Wage is equivalent to the National Living Wage and applies to all employees regardless of age). *</p>	<p>pass / fail</p>
<p>Please tick to confirm that you agree to the principles of the Birmingham Business Charter for Social Responsibility. *</p>	<p>pass / fail</p>
<p>Please tick to confirm that when your organisation reaches an income of £200,000 through new packages under this contract that you will provide a Social Value Action Plan at your annual inspection.*</p>	<p>pass / fail</p>
<p>DECLARATION</p>	
<p>I declare that to the best of my knowledge the answers submitted and information contained in this document are correct and accurate.*</p>	<p>pass / fail</p>
<p>I declare that, upon request and without delay I will provide the certificates and/or documentary evidence referred to in this application (Regulation 59, Public Contracts Regulation 2015) except where this documentation can be accessed by the contracting authority via a national database free of charge or the contracting authority already possesses the documentation.*</p>	<p>pass / fail</p>

I understand that the information will be used in the selection process to assess my organisation's suitability to participate further in this procurement.*	pass / fail
I confirm, by submitting my application that I have read and understood the evaluation criteria contained within the relevant Tender Instructions document, how they will be applied and in particular the explanation against each score.*	pass / fail
I understand that the authority may reject this submission in its entirety if there is a failure to answer all the relevant questions fully, or if false/misleading information or content is provided in any section.*	pass / fail
I am aware of the consequences of serious misrepresentation.*	pass / fail
I declare I will maintain Registration under the Health and Social Care Act 2008, Care Act 2014 and Health and Care Act 2022 (and subsequent amendments) for the duration of these Flexible Contracting Arrangements.*	pass / fail
I declare that the 'regulated activities' and 'service types' linked to your my CQC registration reflect the services being delivered and will be maintained throughout the period of the contract.*	pass / fail
I confirm that I have read and understood the Schedule 14 - Fee Structure within the Flexible Contracting Arrangement or Framework Agreement I am applying for.*	pass / fail
I confirm I have read and understood and agree to abide by the terms of the Flexible Contracting Arrangement or Framework Agreement that I am applying for.*	pass / fail
I confirm that by submitting an on-line tender, and if successful in that tender application and awarded a contract, I will use and promote the Healthwatch feedback tools and use data collected to improve services*	pass / fail
I understand that if I am applying for a location run by two owners, e.g. two companies have a dual registration and are jointly responsible for the services at the location, both companies will have to apply to join the contract and be successful*	pass / fail
Signed *	pass / fail
Name of Organisation *	pass / fail
Job Title *	pass / fail
Date *	pass / fail