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**Provider Details**

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| **Organisation Name** |  | **UKPRN** |  |

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| **Contact Name** |  | **Job Title** |  |

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| **Registered Office Address** |  |

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| **Telephone** |  | **Email** |  |

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| **Nacro Contact** | Chris Morgan | **Job Title** | Head of Contracting & Partnerships |

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| **Telephone** | 0113 2392674 07807 249427 | **Email** | christopher.morgan@nacro.org.uk |

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| **Address** | Nacro, 334 Meanwood Road, Leeds, West Yorkshire, LS7 2JF |

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| **Organisation Details** | | | | | | |
| Company legal name |  | | | | | |
| Year established |  | | Company/Charity Registration(s) No | |  | |
| Trading name (if different) |  | | | | | |
| Main office address  (if different from Registered office address) |  | | | | | |
| In which regions do you are requesting to deliver in | East of England  North West  South East  East Midlands  North East  West Midlands  London  South West  Yorkshire and Humber | | | | | |
| Company status | Ltd Co  Ltd by Guarantee  Ltd Partnership  Sole trader  Other  Charity | | | | | |
| If applicable, what is your most recent Ofsted overall effectiveness grade | Outstanding  Good  Requires Improvement  Inadequate  Not applicable | | | | | |
| If applicable, what grade was your last ESFA Financial Health Assessment | Outstanding  Good  Satisfactory  Inadequate  Not applicable | | | | | |
|  | | | | | | |
| **Finance Data** | | | | | | |
|  | | Previous Year’s Accounts | | Last Year’s  Accounts | | Current Year’s Estimated |
| Audited/Unaudited accounts | |  | |  | |  |
| Turnover/Income | |  | |  | |  |
| Operating expenses | |  | |  | |  |
| Net profit/surplus for the year | |  | |  | |  |
| Breakdown of turnover | | | | | | |
| Private sector % | |  | |  | |  |
| Public % | |  | |  | |  |
| Staffing levels | | | | | | |
| Management | |  | |  | |  |
| Operational | |  | |  | |  |
| Administration | |  | |  | |  |

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| **Current contracts** | | | | | | | | |
| Please provide details for the three largest contracts you currently hold (or have held in the last three years) for the delivery of training/education services, and list any contracts in addition to the main three detailed below | | | | | | | | |
| **Highest value contract** | | | | | | | | |
| Contract name |  | | | | | | | |
| Organisation |  | | | | | | | |
| Date contract commenced |  | Date contract due to end | | |  | | Value |  |
| Brief outline of delivery |  | | | | | | | |
| Geographical area |  | | Targets |  | | Outcomes | |  |
| Were you: the main contract holder  or a sub-contractor | | | | | | | | |
| **Second highest value contract** | | | | | | | | |
| Contract name |  | | | | | | | |
| Organisation |  | | | | | | | |
| Date contract commenced |  | Date contract due to end | | |  | | Value |  |
| Brief outline of delivery |  | | | | | | | |
| Geographical area |  | | Targets |  | | Outcomes | |  |
| Were you: the main contract holder  or a sub-contractor | | | | | | | | |
| **Third highest value contract** | | | | | | | | |
| Contract name |  | | | | | | | |
| Organisation |  | | | | | | | |
| Date contract commenced |  | Date contract due to end | | |  | | Value |  |
| Brief outline of delivery |  | | | | | | | |
| Geographical area |  | | Targets |  | | Outcomes | |  |
| Were you: the main contract holder  or a sub-contractor | | | | | | | | |

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| **Contract performance** | | | | | | | | |
| Have any contracts within the last three years been terminated? | | Yes  No | | If yes, please give details: | | | | |
|  | | | | | | | | |
| **Additional information** | | | | | | | | |
| Do you currently hold or are you working towards the Matrix Accreditation? | | Hold  Working towards  Do not hold | | | | | | |
| What is the ratio for staff to learners on current contracts held? | | 1. Qualified and practising internal verifiers 2. Qualified and practising assessors/IQA 3. Staff working towards their assessor qualification 4. Qualified teaching/training staff 5. English and Maths Tutors | | | | | a)  b)  c)  d)  e) | |
|  |  | | | |  |  | | |
| **References** | | | | | | | | |
| Please note that as part of due diligence we will request references from current/past contractors. References will be taken should your application pass to the next stage.  Please provide details of two referees from your list of contracts detailed previously | | | | | | | | |
| **Referee 1** | | | | | | | | |
| Referee Name | | | |  | | | | |
| Referee Organisation | | | |  | | | | |
| Referee Contact Number | | | |  | | | | |
| Referee Email Address | | | |  | | | | |
| Relationship With Referee | | | |  | | | | |
| Any additional relevant information | | | |  | | | | |
| **Referee 2** | | | | | | | | |
| Referee Name | | | |  | | | | |
| Referee Organisation | | | |  | | | | |
| Referee Contact Number | | | |  | | | | |
| Referee Email Address | | | |  | | | | |
| Relationship With Referee | | | |  | | | | |
| Any additional relevant information | | | |  | | | | |

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| **Policies and procedures** | | | |
| **Please indicate which policies your organisation holds** | | | |
| **Policy** | **Held** | **Not held** | **Date last updated** |
| Equal Opportunities and Diversity |  |  |  |
| Health and Safety |  |  |  |
| Safeguarding |  |  |  |
| Recruiting Safety & Disclosure and Barring |  |  |  |
| Special Education Needs/High Needs Learners |  |  |  |
| General Data Protection Regulation (GDPR) |  |  |  |
| Quality Assurance and Audit |  |  |  |
| Whistle-blowers Charter |  |  |  |
| Document Retention |  |  |  |
| Environmental Sustainability |  |  |  |
| Conflicts of Interest Policy and Register |  |  |  |
| **Please indicate which insurance your organisation holds** | | | |
| **Policy** | | **Held** | **Value of policy** |
| Employer Liability Insurance | |  |  |
| Public Liability Insurance | |  |  |
| Professional Indemnity Insurance | |  |  |
| Trustee Indemnity Insurance | |  |  |

This Pre-Qualification Questionnaire forms part of a competitive tendering exercise and complies with relevant UK and EU procurement guidelines. We will assess your competency (relevant skills, knowledge and experience) as a potential supplier to provide education and training services to our learners.

**Stage 1 Pre-Qualification Questionnaire**

This will assess your legal, financial and procedural state to allow us to identify risks associated in entering into a financial contract. At this stage we will undertake a comprehensive business health check on your organisation. All PQQ activity is in line with ESFA subcontracting guidelines and is pass or fail.

**Stage 2 Invitation to Tender**

This will clearly outline the service specification, the funding model and will assess your technical and professional capability to deliver the service.

**Stage 3 Evaluation**

Based on the answers provided, your tender will be scored against a minimum threshold. Any ITTs that fall below this threshold will not proceed to contract; we reserve the right to provide feedback and further guidance at our discretion in all cases.

**Stage 4 Contract Award**

Both successful and unsuccessful tenders will be notified in writing.

**Deadline: 17:00, 28th November 2018**

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| **Declaration - Please note this PQQ cannot be accepted without the following confirmation.**  1. I confirm that my organisation wishes to be considered as a Nacro contractor, and declare that the information contained in this document is correct to the best of my knowledge.  2. If our application is successful in passing the pre-contracting stage, we agree to provide company financial information and details of past contract performance that will be used in the due diligence process to asses our suitability as a Nacro contractor  3. I acknowledge that this is only at pre-qualifying questionnaire stage and I reserve the right to withdraw my organisation from the application process at any stage up to the signing of a formal subcontract agreement with Nacro.  4. I acknowledge that submission of this document does not infer a contact agreement with Nacro, nor does it guarantee that any contract will be offered in the future. | | | |
| **Applicant signature**  (Director or senior manager) | |  | |
| **Position** | |  | |
| **Date** |  | **Print name** |  |

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| **Nacro Use Only** | | | | | | |
| Due Diligence Outcome | Pass  Fail  Defer | | Comment |  | | |
| **Signature** | |  | | | **Date** |  |