



PRE-QUALIFICATION QUESTIONNAIRE (PQQ)

Understanding, Preparing and Meeting PQ Requirements

A straightforward, practical guide to help care providers understand, prepare for, and successfully complete a Pre-Qualification Questionnaire (PQQ) as part of a local authority or NHS tender process.

This resource was put together by AssuredBID because we see the same PQQ failures repeatedly across providers of all sizes.

1. What Is a Pre-Qualification Questionnaire?

A Pre-Qualification Questionnaire, or PQQ, is a document issued by a commissioner — usually a local authority, NHS body, or integrated care system — at the beginning of a procurement process.

Its purpose is to establish whether an organisation meets the minimum legal, financial and operational standards required to hold a public contract before any evaluation of service quality begins.

The PQQ typically comes before the Invitation to Tender (ITT), which is where commissioners assess the quality of your proposed service delivery. Think of the PQQ as getting through the door. The ITT is what happens once you are inside.

PQQ requirements are not negotiable. Commissioners set pass/fail thresholds for each section and providers who do not meet them are excluded from the process. There is usually no opportunity to resubmit or correct errors after the deadline has passed. Getting it right the first time is the only option.



2. Why the PQ Stage Matters More Than Most Providers Think

Many providers underestimate the PQ stage because it does not feel like the part of tendering that requires skill or strategy. It is largely a document-gathering exercise. That is precisely why it catches so many providers out. The assumption that it can be completed quickly and without preparation is the most common reason for avoidable failure.

The practical consequences of a PQ failure go beyond losing a single contract. Being excluded at PQ stage means your organisation is on record as having not met the minimum standards for that procurement. For some frameworks, particularly larger or longer-term ones, missing out means waiting years for the next opportunity.

The PQ is also the point at which commissioners form their first impression of your organisation. While the PQ itself is pass/fail, the quality and professionalism of a submission can signal to a commissioning team whether you are an organised and credible provider before the ITT stage even begins.

3. What Commissioners Are Looking For at PQ Stage

At the PQ stage, commissioners are not assessing the quality of your care. They are answering three basic questions.

First, are you a legitimate, legally constituted entity that is authorised to deliver the services being procured?

Second, are you financially stable enough to hold and deliver a contract without risk of collapse?

Third, do you have the basic compliance infrastructure — registrations, insurance, policies — that any responsible provider should have in place?

If the answer to any of these questions is no, or if there is insufficient evidence to confirm a yes, the commissioner will exclude the application. There is no partial credit at PQQ stage. You either meet the requirements or you do not.

4. The PQ Requirements at a Glance

PQ Section	What Commissioners Are Checking	Common Documents or Evidence Required	Notes for Care Providers
Company and Legal Standing	That your organisation is legitimately registered, actively trading, and is the correct legal entity to hold a public contract	Companies House registration certificate; certificate of incorporation; registered office address; confirmation of trading status	If you trade under a different name to your registered company name, both must be declared. Recent name changes or structural reorganisations must be reflected consistently across all registrations
Registered Office or Local Presence	That your organisation has a registered office or CQC-registered location within or within a reasonable distance of the commissioning area	CQC registration confirming location address; registered office address on Companies House; evidence of local operational base if required	This is a hard eligibility criterion in many local authority frameworks. Some councils will specify a maximum distance. Check the eligibility criteria before submitting — if you do not have a local presence and the framework requires one, you will be excluded regardless of everything else



<p>CQC Registration and Rating</p>	<p>That you are registered with the CQC for the specific regulated activities covered by the contract, hold a current rating, and have no active enforcement notices</p>	<p>CQC registration certificate; confirmation of regulated activities; current rating evidence; confirmation of no outstanding Warning Notices, Requirement Notices or enforcement action</p>	<p>Most frameworks require a minimum rating of Good. Requires Improvement typically results in exclusion unless the framework explicitly allows for an improvement plan. Inadequate is automatic exclusion. Some frameworks also specify that individual Key Question ratings must meet a minimum threshold</p>
<p>Registered Manager</p>	<p>That a suitably qualified and experienced Registered Manager is currently in post and registered with the CQC for the relevant location</p>	<p>CQC confirmation of Registered Manager registration; RM name and registration number; evidence of qualifications (minimum Level 5 Diploma in Leadership for Health and Social Care expected by most commissioners)</p>	<p>Some commissioners will not accept a submission from a provider without a currently registered manager in post. An Acting or Interim manager may be acceptable in some frameworks but not others. A vacancy at RM level at the time of submission is a significant risk</p>



Financial Standing	<p>That your organisation is financially viable, solvent, and capable of sustaining a contract for its full duration</p>	<p>Two to three years of audited accounts filed at Companies House; most recent balance sheet showing positive net assets; turnover declaration; management accounts if organisation is less than two years old</p>	<p>Most commissioners set a minimum annual turnover threshold, typically one to two times the estimated annual contract value. Net assets must be positive. County court judgements, winding-up orders, or director disqualifications must be declared</p>
Insurance	<p>That you hold the minimum required levels of cover across all relevant policy types</p>	<p>Public liability (minimum £5m, some require £10m); employers liability (£10m); professional indemnity (£2m–£5m); certificates must show the correct legal entity name and must not expire before the framework end date</p>	<p>Insurance certificates are one of the most common causes of exclusion. Check the expiry date of every certificate against the framework period. If a certificate renews during the framework, obtain written confirmation from your broker</p>
Staffing Capacity and Workforce	<p>That you have sufficient staffing capacity to deliver the contract, that your workforce is appropriately qualified, and that your recruitment and retention practices are sound</p>	<p>Current staffing numbers; staff-to-service-user ratio; percentage of staff holding the Care Certificate and Level 2 or Level 3 qualifications; mandatory training compliance rates; safer recruitment</p>	<p>Some PQs ask specifically about the percentage of staff holding Level 3 qualifications and will set a minimum threshold. A high vacancy rate or turnover figure at submission stage is a risk and should be</p>

		policy and DBS checking procedure	addressed with an explanation if required
Service Delivery Experience and Current Capacity	That you have relevant operational experience delivering services of a similar type and that you have the capacity to take on additional work	Number of current service users supported; types of service currently delivered; client groups supported; years of operation; evidence of experience with the relevant client group	Commissioners increasingly ask for evidence that your current service capacity is not already stretched. Experience with the specific client group may be an eligibility requirement, not just a scoring criterion
Geographic Coverage	That you can deliver services within the commissioning area and that you have operational knowledge of the local geography and community	Statement of current operational areas; evidence of local partnerships or community presence; confirmation of ability to cover the required postcode areas or localities	Some frameworks ask for a specific list of postcode areas you can cover. Commissioners in areas with dispersed rural populations sometimes set specific response time requirements that must be met
Policies and Procedures	That you have a current, compliant, and operationally embedded policy framework covering all minimum required areas	Safeguarding policy; health and safety policy; complaints policy; whistleblowing policy; equality and diversity policy; data protection and GDPR policy; modern slavery policy; medicines	Every policy must carry a review date within the last 12 months, a version number, and must be signed by a named senior leader. Policies that do not reference current legislation will fail even if the practice they describe is sound

		management policy; IPC policy; business continuity plan	
Safeguarding History and Compliance	That your safeguarding record demonstrates a proactive and appropriately responsive approach, and that there are no unresolved safeguarding concerns affecting your registration	Summary of safeguarding referrals made in the last 12 months; outcomes of those referrals; evidence of learning and improvement actions	Commissioners are not looking for a low number of referrals. Providers who make no referrals are often not identifying concerns. What they are looking for is evidence that referrals were made appropriately and that learning was embedded
Complaints History	That you handle complaints appropriately and that your complaints data does not indicate systemic quality concerns	Number of formal complaints received in the last 12 months; number upheld; summary of actions taken; evidence of learning from complaints	A high complaints volume is not automatically a concern if accompanied by evidence of robust handling and improvement. What concerns commissioners is a high volume combined with no evidence of action
Equalities and Diversity	That you comply with the Equality Act 2010 in both employment and service delivery, and that equality is actively monitored	Equality and diversity policy; evidence of equality monitoring in recruitment and service delivery; Gender Pay Gap report if you employ 250 or more staff	Commissioners increasingly look for evidence that equality monitoring produces action, not just data

Modern Slavery and Ethical Trading	<p>That you comply with the Modern Slavery Act 2015 and have taken active steps to identify and address risk in your supply chain and workforce</p>	<p>Modern slavery policy (all providers); annual transparency statement published on your website if turnover exceeds £36 million; brief description of supply chain risk assessment</p>	<p>For most care providers below the £36 million threshold, a signed modern slavery policy is sufficient. The document must be signed by a director and reviewed within the last 12 months</p>
Data Protection and Information Governance	<p>That you handle personal data lawfully, securely, and in compliance with UK GDPR and the Data Protection Act 2018</p>	<p>Data protection policy; ICO registration number and expiry date; data breach response procedure; Data Processing Agreements with any third-party processors</p>	<p>Your ICO registration must be current and registered in the name of the applying entity. Pre-2018 policies referencing only the Data Protection Act 1998 are not compliant</p>
Cyber Security	<p>That your organisation has taken reasonable steps to protect its digital systems and the personal data held within them</p>	<p>Cyber Essentials certification (where held); cyber security policy; evidence of staff training on data security</p>	<p>Cyber Essentials is increasingly referenced in care framework PQs, particularly NHS-aligned frameworks. It is not yet a universal requirement but is becoming a differentiator and in some cases an eligibility threshold</p>



Health and Safety	That you have a functioning health and safety management system appropriate to the size and nature of your organisation	Health and safety policy signed and dated within the last 12 months; relevant risk assessments; evidence of H&S training; RIDDOR compliance confirmation	Organisations with five or more employees are legally required to have a written policy. Some frameworks ask specifically about RIDDOR-reportable incidents in the last 12 months
Business Continuity	That you have a plan in place to maintain service delivery in the event of a significant disruption	Business continuity plan; evidence that the plan has been tested or reviewed; named business continuity lead	Business continuity has featured more prominently since the COVID pandemic. Some commissioners now treat the absence of a tested business continuity plan as a pass/fail concern
Living Wage and Employment Practices	That your employment practices meet or exceed the minimum standards expected of a public sector supplier	Confirmation of whether you pay the Real Living Wage; employment contracts; payslip evidence or a director declaration	Some local authorities require providers to pay the Real Living Wage as an eligibility condition. This is a common point of confusion because the Real Living Wage and the National Living Wage are not the same figure



<p>Subcontracting Arrangements</p>	<p>That you are transparent about whether any element of the contract will be delivered by a third party, and that any subcontractors meet equivalent standards</p>	<p>Confirmation of whether subcontracting is intended; percentage of contract value to be subcontracted; identity of proposed subcontractors; confirmation that subcontractors meet equivalent compliance standards</p>	<p>Some commissioners prohibit subcontracting entirely for direct care roles. Others allow it up to a specified percentage. If you intend to subcontract, declare it clearly</p>
<p>References and Past Performance</p>	<p>That you have relevant, verifiable experience delivering services of a similar type, scale, and client group</p>	<p>Two to three commissioner or contract references; contact details for referees; brief description of each contract including service type, client group, contract value, and duration</p>	<p>References must be from services that are similar to the one being procured. A reference from a residential care contract is not a strong reference for a supported living framework. Contact referees in advance</p>



5. Section by Section: What You Need and Why

Company and Registration Details Commissioners cross-check your submission against Companies House records. The most common issue is a mismatch between the name on the tender and the registered company name. Check that your registration is active, your address is current, and your company number matches exactly what is shown in your tender documents.

Financial Standing Commissioners review your filed accounts, check your net asset position, and in some cases run automated credit checks. Most set a minimum annual turnover, often linked to the estimated contract value. If your accounts are less than two years old, prepare signed management accounts. Run a credit check on your own organisation before submitting.

Insurance A certificate that does not meet the minimum level, covers the wrong entity, or expires before the framework end date will fail the check. Check every expiry date against the framework period. If your policy renews during the framework, confirm your broker will issue an updated certificate.

CQC Registration Most supported living and care framework tenders require a minimum rating of Good. A Requires Improvement rating will result in automatic disqualification in most frameworks. Check the PQ requirements before investing time in the submission. If you are a new provider without a rating, check whether the framework is open to unrated providers before proceeding.

Policies and Procedures The most common issue is not the absence of policies but the presence of policies that are out of date, unsigned, or do not reference the current legislative framework. Every policy must carry a review date within the last 12 months and must be signed by a named senior leader.

Equalities and Diversity Your policy must reference all nine protected characteristics and include a statement on how equality is monitored in both employment and service delivery.

Modern Slavery A transparency statement is a legal requirement for organisations with turnover over £36 million. All providers, regardless of size, should have a modern slavery policy signed by a director.

Data Protection and GDPR Your policy must reference UK GDPR specifically, state your ICO registration number, include your lawful basis for processing personal data, and contain a data breach response procedure.

Health and Safety Any organisation with five or more employees is legally required to have a written policy. It must be signed, dated, and reviewed within the last 12 months.

References and Past Performance Use references from services that are as close as possible in type, client group, and contract value to the one you are bidding for. Contact referees in advance to confirm they are available and willing to respond within the timeframe given.

Continues in Part 2 — Common Reasons Providers Fail, Your PQ Submission Form, and Next Steps. To access Part 2, click the link below to get it

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