2026 CMR Third Sector and Independent Provider Partners - 1 April 2025 to 31 March 2026

Currently, Microsoft Forms does not offer the ability to save your progress and resume later. Therefore, you will need to complete the form in one sitting. We recommend drafting your response in a separate document first. For your convenience, a PDF copy of the form has been provided in advance to enable you to see all the questions and prepare your responses. Once you're ready, you can copy your answers into the form and submit them in one session.

Upon completion of the form, you will have the option to "Save my Response", this is only available if you have a Microsoft account. If you are unsure whether you have a Microsoft account, try signing in using an email address you commonly use with Microsoft services (e.g. Outlook or Office 365) www.office.com

Below is a guide on signing in to Office 365:

support.microsoft.com/en-gb/office/sign-in-to-office-b9582171-fd1f-4284-9846-bdd72bb28426

If you don't have a Microsoft account, please email Commissioning@dumgal.gov.uk to request a PDF copy of your form.

* Required

Section 1 - About your Service

Please provide your service contact details:

Provide basic details for the service you are completing the survey on behalf of. Remember that if any of these details have changed recently you should have already notified Commissioning@dumgal.gov.uk

1. Service Name *

Please select your service from the following list. If your service is not listed, please contact Commissioning@dumgal.gov.uk :

- ◯ Annan & District Day Centre
- ◯ Better Lives Partnership
- ◯ Care and Repair Dumfries & Galloway
- ◯ Castle Douglas Day Centre
- ◯ Change Mental Health - Specialist Mental Health
- ◯ Change Mental Health - Support Service
- ◯ Crossroads - Annandale and Eskdale
- ◯ Crossroads - Dumfries and Lower Nithsdale
- ◯ Crossroads Care and Support - Newton Stewart & Machars
- ◯ D&G HandyVan
- ◯ Dalbeattie & District Day Centre
- ◯ DG Advocacy
- ◯ DG Voice
- ◯ Dumfries Day Centre
- ◯ Ecclefechan Day Centre
- ◯ Enable Scotland - Mid & Upper Nithsdale
- ◯ Enable Scotland - Stewartry
- ◯ Gretna Day Centre
- ◯ Langholm Day Centre
- ◯ Newton Stewart Day Centre
- ◯ Stranraer Day Centre (Coronation)
- ◯ The Furniture Project Stranraer Ltd

2. Service Address *

Address of service including postcode.

3. Name of Person Completing Form *

Enter the name of the person completing the form.

4. Designation *

Enter the Job Title of person completing the form.

5. Email Address *

Email address of the person completing the form. An email acknowledgement will be sent to this address.

6. Contact Telephone Number *

Enter main contact telephone number.

7. Charity Registration Number (if applicable)

Obtainable from the Office of the Scottish Charity Regulator oscr.org.uk

8. Company Registration Number (if applicable)

A company registration number (CRN) is an 8-character code applicable to Limited Companies or Limited Liability Partnerships.

9. Charity/Company Registered Address

This could be addresses for both.

10. What type of service/support do you deliver? *

'Other' might include services for people with Autism, Advocacy Services, Advice Service etc. This should relate to work you do that is commissioned by the Health and Social Care Partnership in Dumfries and Galloway and not any extended parts of a larger business.

- ◯ Learning Disabilities/Mental Health Support
- ◯ Short Breaks/Carers Respite
- ◯ Day Centre
- ◯ Carers Supports
- ◯ Other

Section 2 - Management Changes

11. Have there been any changes to management personnel since 1 April 2025? *

    This is for all local managers such as deputy and service managers as well as more senior area or regional managers. Management changes should be notified to Commissioning as they occur.

    ◯ Yes

    ◯ No

12. Please provide the name, designation and contact details including telephone number and email address *

    Use the space provided to add new contact details if this has not already been provided.

Section 3 - Organisation Changes

13. Have there been any changes to your organisational/company structure during the period 1 April 2025 to 31 March 2026, for example changes to the Board of Directors or transfer of ownership. *

    Other examples for this question might be corporate re-structuring or changes in company ownership.

    ◯ Yes

    ◯ No

14. As you have answered "Yes", please provide details of the changes: *

    Please note that we may be in touch to request further information regarding these changes if required.

Section 4 - Financial and Insurance Information

15. Do you have details of income and expenditure/accounts for the period 1 April 2025 to 31 March 2026? ***You will be asked to email evidence at the end of this form. Where this is not currently available, please email your most recent financial information.***

    This should show a summary of all income and expenditure. These details should be emailed. Annual accounts should be submitted if these are available. If financial details are not available, please give reasons for this in the space provided.

    ◯ Yes

    ◯ No

16. As you have answered "No", please explain why not: *

17. Does your organisation have sufficient funding and reserve/contingency funding to meet your contractual obligations? *

    This is sufficient funds to meet the needs of the service as per the contract and sufficient reserves for redundancies if required. This does not include other parts of your business that might receive funding from different sources.

    ◯ Yes

    ◯ No

18. As you answered "No", please provide details: *

19. Are you actively seeking additional funding? This may include fundraising activities and any cost-saving initiatives during the period 1 April 2025 to 31 March 2026: *

- ◯ Yes
- ◯ No

20. As you answered "Yes", please provide details: *

Please provide details of fundraising activities and external funding both received and applied for.

21. Did your organisation receive funding in addition to that received by Dumfries and Galloway Health and Social Care Partnership during the period 1 April 2025 to 31 March 2026? *

- ◯ Yes
- ◯ No

22. As you answered "Yes", please provide details: *

23. Does your organisation have current Public and Employer's liability insurance? ***You will be asked to email a copy of your current Public and Employer's liability insurance (this should include the part of the schedule that details the amounts, as relevant to your contract).****

Public and Employer Liability Insurance are two distinct types of insurance and both are required.

- ◯ Yes
- ◯ No

24. As you answered "No", please provide details: *

Section 5 - Sustainability

25. Do you have any concerns about the sustainability of your service? *

This may also include financial concerns or wider economic or policy related issues.

- ◯ Yes
- ◯ No

26. As you have answered "Yes", please provide details: *

Section 6 - Referral and Support Information

27. If applicable, how many referrals have you received to the service during the period 1 April 2025 to 31 March 2026. *

These are referrals from all sources. If none, please enter a zero (0)

The value must be a number

28. On 31 March 2025, did you have any capacity/vacancies in your service? *

This is a yes/no question to determine if you have any capacity/availability in your service for people using your service. This does not relate to staff vacancies.

- ◯ Yes
- ◯ No

29. Please provide details. If Not Applicable, please enter N/A: *

30. Please provide the number of people supported during the period 1 April 2025 to 31 March 2026: *

The value must be a number

31. Please provide the number of people you anticipate supporting in the future (1 April 2026 to 31 March 2027): *

The value must be a number

32. If applicable, how many Adult Support and Protection referrals have you made during the period 1 April 2025 to 31 March 2026? If none, please enter a zero (0) *

Adult Support and Protection referrals are sometimes shortened to ASP's. This could include any occasion when you have contacted Social Work Services with a concern about an individual.

The value must be a number

Section 7 - Service User Outcomes

You will be asked to email your supporting evidence of activities undertaken and outcomes achieved during the period 1 April 2025 to 31 March 2026 at the end of this form.

To evidence the activities and outcomes undertaken in the reporting period you can submit a maximum number of 10 relevant documents, and these can be in various formats.

Examples of supporting evidence:

> Evaluations

> Annual Report/AGM

> Marketing Information

> Events Overview

> Outcome reports/Case Studies and additional outcome evidence to reflect the requirements of the contract.

> Relevant Data (this may include statistics and figures that are required to meet the outcome of the contract, for example: membership numbers, number of people using the service, number of leavers and whether planned/unplanned).

Please note that this list is not exhaustive. Evidence should reflect the outcomes as detailed in your contract or service specification.

33. Have you achieved the outcomes as detailed in the requirements of your contract and service specification during the period 1 April 2025 to 31 March 2026? *

    This relates to the outcomes as detailed in the Contract, Service Agreement, Service Level Agreement or Grant of funding between your organisation and Dumfries and Galloway Council (or the Health and Social Care Partnership).

    ◯ Yes

    ◯ No

34. As you answered "Yes", please provide a brief description of activities undertaken during the period 1 April 2025 to 31 March 2026 to achieve these outcomes: *

    Please note that this should be a short list and include all activities undertaken in the reporting period for the funding provided, these are the outputs/means of evaluation detailed in the service specification to meet the outcomes of the contract.

Outcomes not Met

35. As you answered "No", please provide details of outcomes not met and the reason(s) why and include any risks/challenges in relation to your contract/service specification. *

Section 8 - Comments or Compliments or Complaints

36. Did you record any comments or compliments or complaints received during the period 1 April 2025 to 31 March 2026? *

A comment can be any suggestions or observation about your service that is not a compliment or complaint.

- ◯ Yes
- ◯ No

37. As you have answered "No", please explain your rational for not recording comments or compliments or complaints (is this in line with your company policy?) *

38. Please provide the number of comments received during the period 1 April 2025 to 31 March 2026. If none, please enter a zero (0). *

The value must be a number

39. Please provide the number of compliments received during the period 1 April 2025 to 31 March 2026. If none, please enter a zero (0). *

The value must be a number

40. Please provide the number of complaints received during the period 1 April 2025 to 31 March 2026. If none, please enter a zero (0). *

The value must be a number

41. Please provide details of complaints. This should include date, reason and any actions/outcomes taken. (Please note, no names or other personal details should be provided) If not applicable, please enter N/A: *

Section 9 - Communication

42. During the period 1 April 2025 to 31 March 2026, did you maintain communications with people who use the service and/or people who deliver the service to encourage feedback (for example, survey, newsletter, other correspondence, etc)? *

This question refers to your organisation pro-actively seeking the views of stakeholders.

- ◯ Yes
- ◯ No

43. As you have answered "Yes", please indicate how you obtained feedback from the people who use your service, their families and people who deliver the service: *

Respondents can select multiple options.

- ☐ Event/Function
- ☐ Meetings with people who use the service
- ☐ Survey
- ☐ Training Feedback
- ☐ Feedback not received in this reporting period
- ☐ Other

44. If you answered "Other", please provide details. If Not Applicable, please enter N/A: *

45. Have actions been taken from the feedback received? ***You will be asked to email evidence of actions taken at the end of this form.***

Seeking feedback, and then creating an action-plan based on information received, is an important part of service improvement. If there has been no action taken following feedback, please explain why. No personal details should be provided.

- ◯ Yes
- ◯ No

46. Please provide details of what action you have taken as a result of the information received via surveys/feedback: *

47. As you have answered "No", please provide details: *

48. Please provide details of why you have not encouraged feedback (for example, survey, newsletter, other correspondence, etc)? *

Section 10 - About your Workforce

49. Please provide the total number of staff as at 31 March 2026 (Please note that this should include staff that are on long term sick and maternity/paternity leave): *

Number of people is the total headcount. People on long term sick or maternity/paternity leave (or any other type of leave) can be included.

The value must be a number

50. Did you have any staff on casual and/or zero-hours during the period 1 April 2025 to 31 March 2026? *

- ◯ Yes
- ◯ No

51. Please provide the number of casual staff used during the period 1 April 2025 to 31 March 2026. If none, please enter a zero (0). *

The value must be a number

52. Please provide the number of zero-hours staff used during the period 1 April 2025 to 31 March 2026. If none, please enter a zero (0). *

The value must be a number

53. Please provide the total hours of volunteering completed in the period 1 April 2025 to 31 March 2026. If none or not known, please enter a zero (0): *

This is a headcount. If none, please enter a zero (0).

54. Please provide the number of staff **recruited** during the period 1 April 2025 to 31 March 2026. If none, please enter a zero (0). *

Please note that this is for the local service only.

The value must be a number

55. Please provide the number of **vacant** posts as at 31 March 2026. If none, please enter zero (0). *

The value must be a number

56. Have staff left your service during the period 1 April 2025 to 31 March 2026? *

- ◯ Yes
- ◯ No

57. Please provide the number of staff who have **left** your service during the period 1 April 2025 to 31 March 2026. If none, please enter zero (0).
The sum of all the subsequent questions in this section should equal this total number. *

The value must be a number

58. Please provide the number of staff who have left due to **Retirement**. If none, please enter a zero (0). *

The value must be a number

59. Please provide the number of staff who have left due to **Ill Health**. If none, please enter a zero (0). *

The value must be a number

60. Please provide the number of staff who have left due to **New Job in Independent Care Sector**. If none, please enter a zero (0). *

Private, Personal Assistant (PA) or Charitable Care Organisations

The value must be a number

61. Please provide the number of staff who have left due to **New Job in Statutory Sector**. If none, please enter a zero (0). *

Public Sector Bodies i.e. NHS or Local Authorities

The value must be a number

62. Please provide the number of staff who have left due to **New Job out with Health and Social Care**. If none, please enter a zero (0). *

The value must be a number

63. Please provide the number of staff who have left due to **Other**. If none, please enter a zero (0). *

The value must be a number

64. If you answered "Other", please provide details or enter N/A for not applicable: *

65. Please provide the number of staff who have left due to **Not Known**. If none, please enter a zero (0). *

The value must be a number

Section 11 - Workforce Disclosure Scotland and/or PVG Registration

66. Do you maintain a record of workforce Disclosure Scotland and or PVG registrations and renewal dates? *

- ◯ Yes
- ◯ No

Section 12 - Workforce Training

67. Has any staff/volunteer training taken place during the period 1 April 2025 to 31 March 2026? *

Please detail each training course and how many staff attended each one. Please don't include personal staff details.

- ◯ Yes
- ◯ No

68. As you answered "Yes", please provide details: *

Please detail each training course and how many staff attended each one. Please don't include personal staff details.

69. As you answered "No", please provide details: *

Section 13 - Staffing Challenges

70. Did you have any staffing challenges as at 31 March 2026 (for example, long-term sickness, staff vacancies, staff disciplinaries)? *

- ◯ No staffing challenges
- ◯ Minor staffing challenges (for example, not affecting the service provision)
- ◯ Significant staffing challenges (for example, affecting the service provision)

71. As you have had staffing challenges, please provide details (Please note, no names or other personal details should be provided): *

Please provide information for any staffing issues both minor and major.

Section 14 - Organisational Operational Policies and Procedures

72. Are all relevant policies and procedures updated to reflect the most recent changes to Legislation? *

- ◯ Yes
- ◯ No

73. As you answered "No" please provide details: *

Section 14 - Organisational Operational Policies and Procedures (Continued)

74. Please complete the Operational Policies Checklist below in relation to your organisation by indicating those policies that apply (access to these may be requested): *

This is a checklist and not all of these may apply to your service, in which case you can select N/A. If No is selected, please provide the details in the space provided. For example, this may be because of very recent changes that are in the process of being reviewed.

	Yes	No	N/A
Adult/Child Protection	◯	◯	◯
Board Roles and Responsibilities	◯	◯	◯
Equality and Diversity	◯	◯	◯
Managing Person's Monies	◯	◯	◯
General Data Protection Regulations	◯	◯	◯
Health & Safety	◯	◯	◯
Infection Control	◯	◯	◯
Staff Supervision including Appraisal	◯	◯	◯
Records Management	◯	◯	◯
Recruitment and Selection	◯	◯	◯
Risk Management	◯	◯	◯
Staffing and Training	◯	◯	◯
Volunteering	◯	◯	◯
Human Resources (HR) Policies and Procedures / Employee Handbook (pay, terms and conditions, annual leave etc.)	◯	◯	◯

75. Where you do not have all the above policies and procedures in place, please provide a reason or enter N/A: *

Section 15 - Additional Information

76. Do you have any additional information you wish to share with us (this could include what has worked well and what has not, opportunities, planned future developments or any other issues)?

    This is an opportunity to share any other information relevant to your service in relation to meeting the outcomes detailed in your contract. For any urgent issues you should email Commissioning@dumgal.gov.uk

    ◯ Yes

    ◯ No

77. As you answered "Yes" please provide details:

Section 16 - Partnership Support and Feedback

78. What could the Partnership do to support your service moving forward?

79. We would welcome your feedback on your experience in completing this form.

Disclaimer

By submitting this form, I hereby confirm that all information provided is true and accurate to the best of my knowledge. I understand that any deliberate misrepresentations may result in non-compliance. Additionally, I agree to submit all required documents as evidence to support the information provided and further evidence may be required upon request.

If you realise after submitting your completed survey that you have omitted or given any incorrect information, please email full details to Commissioning@dumgal.gov.uk

80. Please email the following documents to Commissioning@dumgal.gov.uk *

- [ ] Income and Expenditure/Accounts or most recent financial information (Ref. Section 4)
- [ ] Current Public and Employer's liability insurance (Ref. Section 4)
- [ ] Please email supporting evidence of activities undertaken and outcomes achieved (Ref. Section 7)
- [ ] **If applicable**, please email details of what action you have taken as a result of the information received via surveys/feedback (Ref. Section 9)

Guidance on Printing/Saving a copy of your CMR Return

Once you click "Submit" you should automatically receive an email confirming your submission. You may request a PDF copy of your response by emailing Commissioning@dumgal.gov.uk

If you have a Microsoft 365 Login, you will have the option to Save your response. Your response can be found in Office 365 Forms and go to the Filled Forms section.

If you have any difficulty accessing or viewing your form, please do not hesitate to contact us.

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