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|  **FREEDOM OF INFORMATION REQUEST QUESTIONNAIRE** |
| ***Questions applicable for the months of March, April, May, June, July, August (2020)*** |
| **Question** | **Answer Column** |
| **Q1** | Did your Local Authority offer any additional fees, over and above any payments arising from existing contractual arrangements to care/nursing homes in your area, specifically to receive Covid-19 positive patients from hospitals?  | *Please respond with* ***Yes or No:***  |
| **Q2** | If the answer to Q1 is ‘yes’, would you provide us with details and copies of any written communications i.e. emails, letters etc. | *Please describe:* |
| **Q3** | Did any care/nursing homes accept those offers and receive such payments?  | *Please respond with* ***Yes or No:*** |
| **Q4** | If the answer to Q3 is ‘yes’, what were the names of the care/nursing homes?  |  |
| **Q5** | What amount of money was paid? And how was the payment administered?  |  |
| **Q6** | If a payment was made, was it per patient, for the block purchasing of beds or both or for some other purpose?  | *Please describe:* |
| **Q7** | Under which funding stream were the payments made? | *Please describe:* |
| **Q8** | Did your local Authority enter new contracts with care/nursing homes which included contractual terms providing for additional payments if they received Covid-19 positive patients/residents? | *Please respond with* ***Yes or No:*** |
| **Q9** | If the answer to Q8 is ‘yes’, are you able to name the care/nursing homes? If your answer is no, can you say why you cannot name the home(s)? |  |
| **Q10** | What were those contractual terms? | *Please describe:* |
| **Q11** | Were any care/nursing homes advised that they risked losing funding or access to funding if they refused to accept Covid-19 positive patients/residents? | *Please respond with* ***Yes or No:*** |
| **Q12** | If so, how much funding was withdrawn?  |  |
| **Q13** | If the answer to Q11 is ‘yes’, are you able to name the care/nursing homes? If your answer is no, can you say why you cannot name the home(s)? |  |
| **Q14** | Were any fines levied to your Local Authority or delayed discharges from the NHS? | *Please respond with* ***Yes or No:*** |