**Care Home Visiting Pods access to the Hardship Fund- Criteria**

**How to make a claim:**

To make a claim for eligible costs please complete this form and submit to the Welsh Government via email to [WGVisitingPodPilot@gov.wales](mailto:WGVisitingPodPilot@gov.wales) mailbox as soon as possible and **by Friday 26 February.** Welsh Government care homes policy team will notify you of the claim outcome via [WGVisitingPodPilot@gov.wales](mailto:WGVisitingPodPilot@gov.wales)

Evidence should be submitted to support your claim, demonstrating the costs you have incurred.

If your claim is agreed and confirmed by the Welsh Government you should submit the claim via the Local Government Hardship Fund alongside your normal monthly claim for the national uplift and any voids. You should provide the Local Authority with the agreed claim outcome email from the Welsh Government.

**You should not enter a claim via the Local Government Hardship Fund in relation to the care home visiting pods pilot scheme without confirmation from Welsh Government via the dedicated mailbox** [WGVisitingPodPilot@gov.wales](mailto:WGVisitingPodPilot@gov.wales) **that your request has been successful.**

|  |  |  |  |
| --- | --- | --- | --- |
| Care home name |  | | |
| Provider name |  | | |
| *You agree to Welsh Government publicising that you are participating in the pilot scheme.* | | | |
|  | **Supplier** | **Amount** | **Evidence included (please click)** |
| Direct hire costs for visitor pod |  | £ |  |
| Additional insurance costs (either for direct hire or WG hire) |  | £ |  |
| **Total** |  | £ |  |

**Declaration: I confirm the above details are correct. All criteria set out in the Welsh Government letter to adult care home providers dated 15 December** **have been met. If claiming for reimbursement of visiting pod hire, the visiting pod meets the basic specification.**

|  |  |
| --- | --- |
| **Signed on behalf of care home provider:** | |
| *Print name:* |  |
| *Position:* |  |
| *Contact email address and telephone number* |  |
| *Signature:* |  |
| *Date:* |  |