

FOI_0644_21/22 – FOI request concerning – Third Party Involvement

1. Does the organisation receive private patient income from Third Parties? (for example, for delivery of private patient services, for renting of space, through a commercial agreement etc.)

N/A

2. If yes, please state the name/names of the third parties (eg. HCA, BUPA, Spire Healthcare)

N/A

3. What category of income does the organisation receive from the third party? Please tick the options that apply in the table below:

N/A

Category of Income	Tick Below
Joint Venture (a commercial arrangement between two or more participants)	
Rental of estates or hospital space	
A Profit Share Agreement (an agreement between two or more entities who pool resources and agree to split earnings by sharing profit on a pre-agreed ratio)	
Payment by Activity (is a form of financing that makes payments contingent on results for example number of patients treated, number of procedures completed)	
Other (please state)	