

## ICMJE DISCLOSURE FORM

**Date:** 9/30/2022

**Your Name:** Karen Spilsbury

**Manuscript Title:** Relationship between care home staffing and quality of care: the StaRQ mixed methods study

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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<b>Time frame: Since the initial planning of the work</b>									
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4	Consulting fees	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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**Please place an "X" next to the following statement to indicate your agreement:**

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 3/24/2022

**Your Name:** Andy Charlwood

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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## ICMJE DISCLOSURE FORM

**Date:** 9/30/2022

**Your Name:** Professor Carl Anthony Thompson

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

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## ICMJE DISCLOSURE FORM

**Date:** 9/15/2021

**Your Name:** Kirsty Haunch

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** HS&DR 15/144/29

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <b>None</b>	
		I am a current member of the HTA Prioritisation Committee A (Out of hospital) March 2022-2023.	
6	Payment for expert testimony	<input checked="" type="checkbox"/> <b>None</b>	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> <b>None</b>	
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## ICMJE DISCLOSURE FORM

**Date:** 4/12/2022

**Your Name:** Danat Valizade

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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**Please place an "X" next to the following statement to indicate your agreement:**

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 3/31/2022

**Your Name:** REENA DEVI

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

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## ICMJE DISCLOSURE FORM

**Date:** 4/5/2022

**Your Name:** Cornell JacksonF

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

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<b>5</b>	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> <b>None</b>	
<b>6</b>	Payment for expert testimony	<input checked="" type="checkbox"/> <b>None</b>	
<b>7</b>	Support for attending meetings and/or travel	<input type="checkbox"/> <b>None</b>	
		Travel for fieldwork paid by original grant	
<b>8</b>	Patents planned, issued or pending	<input checked="" type="checkbox"/> <b>None</b>	
<b>9</b>	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> <b>None</b>	
<b>10</b>	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> <b>None</b>	

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## ICMJE DISCLOSURE FORM

**Date:** 3/24/2022

**Your Name:** David Alldred

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

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**Please place an "X" next to the following statement to indicate your agreement:**

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



## ICMJE DISCLOSURE FORM

**Date:** 9/30/2022

**Your Name:** Antony Arthur

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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4	Consulting fees	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">HSDR funding committee 2014-2018</td> <td style="width: 50%;">No individual or institutional payment</td> </tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>	HSDR funding committee 2014-2018	No individual or institutional payment							
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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 4/4/2022

**Your Name:** Lucy Brown

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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## ICMJE DISCLOSURE FORM

**Date:** 4/6/2022

**Your Name:** Paul Edwards

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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## ICMJE DISCLOSURE FORM

**Date:** 4/4/2022

**Your Name:** Will Fenton

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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<b>4</b>	Consulting fees	<input type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
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<b>6</b>	Payment for expert testimony	<input type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
<b>7</b>	Support for attending meetings and/or travel	<input type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
<b>8</b>	Patents planned, issued or pending	<input type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
<b>9</b>	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
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<b>13</b>	Other financial or non-financial interests	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							

**Please place an "X" next to the following statement to indicate your agreement:**

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 9/30/2022

**Your Name:** Heather Gage

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 4/7/2022

**Your Name:** Matthew Glover

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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<b>Time frame: past 36 months</b>									
<b>2</b>	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							
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## ICMJE DISCLOSURE FORM

**Date:** 9/30/2022

**Your Name:** Barbara Hanratty

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 3/29/2022

**Your Name:** Professor Julienne Elizabeth Meyer

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods (StaRQ)

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<b>Time frame: Since the initial planning of the work</b>			
<b>1</b>	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<input type="checkbox"/> <b>None</b>  <div style="border: 1px solid black; padding: 5px;"> <p>Co-Investigator for NIHR funded <i>StaRQ study</i> (Relationship between care home staffing and quality of care: a mixed methods):                      WP1: Determining the characteristics of the care home nursing and support workforce and understanding care quality (study objectives 1, 3, 4, 5)                      WP4: Understanding the contributions of the care home workforce to enhance quality (study objective 4 and 5)                      WP5: a platform for translation and dissemination (study objective 6)</p> <p>Involved in all aspects of the StaRQ study, to a limited extent (1 day/month), as a critical friend with knowledge and insight into the care home sector</p> </div>	<div style="border: 1px solid black; padding: 5px;"> <p>Retired from City, University of London on 30 September 2019.                      Prior to this time (01 July 2017 – 30 September 2019), contract and payments (approx. £500, 1 day/month) were made to City, University of London.                      After this time (01 October 2019 – 30 June 2020), contracts and payments were made to National Care Forum (£500 per day, 1 day/month), who then paid me as an independent consultant (£350 per day, 1 day/month) to work on StaRQ study.</p> </div>
<b>Time frame: past 36 months</b>			
<b>2</b>	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> <b>None</b>  <div style="border: 1px solid black; padding: 5px;"> <p>Invited to lead funding application for the Dunhill Medical and National Lottery Community funded <i>CHFAns:IL project</i> (Care Home Friends and Neighbours Intergenerational Linking)</p> </div>	<div style="border: 1px solid black; padding: 5px;"> <p>City, University of London awarded £1,007,739 (1 October 2019-30 September 2022).                      Retired from City, University of London on 30 September 2019, when CHFAns:IL project was being set up.</p> </div>

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
			Contract and payments were made to City, University of London, who then paid me £500 per day to work (2 days/month) as an independent consultant (1 October 2019 – 28 February 2021) on the CHFANs: IL project
		Co-Investigator and Co-Lead for Patient and Public Involvement and Engagement for NIHR funded <i>DACHA study</i> (Developing research resources and minimum data set for care homes' adoption and use)	Retired from City, University of London on 30 September 2019, when DACHA project was being set up. Contract and payments were made to National Care Forum (£500/day), who then paid me £350 per day to work as an independent consultant (1 October 2019 - 30 September 2021), 0.5 days/month and then 1 October 2021 to date, 1 day/month) on the DACHA study
<b>3</b>	Royalties or licenses	<input checked="" type="checkbox"/> <b>None</b>	
<b>4</b>	Consulting fees	<input type="checkbox"/> <b>None</b>	
		Facilitator: Kings Fund/My Home Life Care Homes, Housing, Health and Social Care: Learning Network (The King's Fund)	Post retirement, paid direct by The King's Fund as an independent consultant (1 October 2019-August 2020, 4 days in total)
		Co-Chair: Commission on the role of housing in the future of care and support (Social Care institute for Excellence)	Post retirement, paid direct by The Social Care Institute for Excellence as independent consultant (1 October 2019 – 8 March 2021, 8 days in total)
		Research and Development Consultant: CHFANs: IL project (City, University of London)	Post retirement, paid by City, University of London as independent consultant on the Dunhill Medical and National Lottery Community funded Care Home Friends and Neighbours Intergenerational Linking project, (1 October 2019-February 2021, 2 days/month) – see above.
		Research and Development Consultant: StaRQ study (National Care Forum)	Post retirement, paid by National Care Forum as an independent consultant on the NIHR funded StaRQ study (01 October 2019 – 30 June 2020, 1 day/month) – see above.
		Research and Development Consultant: DACHA study (National Care Forum)	Post retirement, paid by National Care Forum as an independent consultant on the NIHR funded DACHA study (1 October 2019 - 30 September 2021, 0.5 days/month and then 1 October 2021 to date, 1 day/month) – see above
		Strategic Advisor: Standards Wise International	Paid consultant, since 16 October 2020 (3 meetings a year)

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> <b>None</b> <table border="1" data-bbox="383 170 1516 275"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>													
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<b>11</b>	Stock or stock options	<input checked="" type="checkbox"/> <b>None</b> <table border="1" data-bbox="383 172 1516 275"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						
<b>12</b>	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> <b>None</b> <table border="1" data-bbox="383 392 1516 495"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						
<b>13</b>	Other financial or non-financial interests	<input checked="" type="checkbox"/> <b>None</b> <table border="1" data-bbox="383 613 1516 716"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						

**Please place an "X" next to the following statement to indicate your agreement:**

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

**Date:** 9/30/2022

**Your Name:** Aileen Waton

**Manuscript Title:** Relationship between care home staffing and quality of care: a mixed methods

**Manuscript Number (if known):** Not known

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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