

DECLARATION OF INTERESTS FORM

Interventions to treat Stress Urinary Incontinence (SUI) and Pelvic Organ Prolapse (POP): Current and Future Service Meetings

Name	Role in SUI and/or POP work	Description of Interest	Relevant Dates		Comments
			From	To	
Ms Jane Smith		<i>employed by/ funded by/ research interests connected to commercial providers.</i>	21/12/2016	21/12/2018	General description of services
Christine Hemming	Principal Aberdeen investigator and grant holder for TOPSY	Funded by grant for clinical/ research involvement and assist on publications	2018	Ongoing	Clinician leading research/ recruitment in Aberdeen and input into publications
Christine Hemming	Principal Aberdeen investigator and grant holder for Pro Long 21+	Funded by grant for clinical/ research involvement and assist on publications	2019	Ongoing	Clinician leading research/ recruitment in Aberdeen and input into publications
	Member of TVMO group	Advisory on group as MD	2018	Ongoing	Supported by employing Board

Please see below for information on how to populate the above boxes

The information submitted will be held by **the Scottish Government** for audit of groups as specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that the **Scottish Government** holds.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to the **Scottish Government** as soon as practicable and no later than 28 days after the interest arises.

I do give my consent for this information to published on registers that the Scottish Government holds.
 If consent is NOT given please give reasons:

Signed: 

Date: 4.04.19

Please return this form to Mark Johnstone, Office of the Chief Medical Officer, Room 1E08, DG Health and Social Care, The Scottish Government, St Andrew's

GUIDANCE NOTES FOR COMPLETION OF DECLARATION OF INTERESTS FORM

Name and Role: Insert your name and your position/role in relation to your SUI/POP work.

Description of Interest: Provide a description of the interest that is being declared. This should contain enough information to be meaningful (e.g. detailing the supplier of any gifts, hospitality, sponsorship, etc). That is, the information provided should enable a reasonable person with no prior knowledge to read this and understand the nature of the interest.

Types of interest:

Financial interests - This is where an individual may get direct financial benefits from the consequences of a decision they are involved in making

Non-financial professional interests - This is where an individual may obtain a non-financial professional benefit from the consequences of a decision they are involved in making, such as increasing their professional reputation or status or promoting their professional career

Non-financial personal interests - This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit, because of decisions they are involved in making in their professional career

Indirect interests - This is where an individual has a close association with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest who would stand to benefit from a decision they are involved in making

A benefit may arise from both a gain or avoidance of a loss.

Relevant Dates: Detail here when the interest arose and, if relevant, when it ceased

Comments: This field should detail any action taken to manage an actual or potential conflict of interest. It might also detail any approvals or permissions to adopt certain course of action

