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| **Name:** |  | | |
| **Position within, or relationship with, NHS C&M:** |  | | |
| **Are you a Voting member of an ICB Committee – if YES please specify** | COMMITTEE(s): | VOTING MEMBER: | NON VOTING MEMBER: |
| **Are you a Voting member of a Place-based Committee – if YES please specify** | COMMITTEE(s): | VOTING MEMBER: | NON VOTING MEMBER: |

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| **Type of Interest\***    \*See attachment for details  *(If Indirect, please explain your relationship with the person that holds the interest)* | ***Description of the Interest, including:***   * ***Name and details of the organisation (or subject);*** * ***The nature of the role / relationship with it which constitutes an interest.***   *(Please include positions within any provider organisation or GP practice; directorships; ownership / part-ownership of companies; shareholdings in companies in the field of health & social care; positions of authority in any organisation linked with health & social care; any research or funding grants received;* ***any other role or relationship which could be perceived to influence your judgement when acting for NHS C&M****) For secondary employment please state time & value impact of role(s).* | **The dates the interest remains valid**  *(e.g. the length of tenure in a particular position)*  **From: To:** | | **Actions to be taken to mitigate the conflict of interest**  *(If already agreed with Associate Director Corporate Affairs/ Chief Executive or COI Guardian)* |
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The information submitted will be held by NHS C&M for personnel or other reasons 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 NHS C&M holds.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to NHS C&M as soon as practicable and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, or internal disciplinary action may result.

I **do / do not [delete as applicable]** give my consent for this information to published on registers that NHS C&M holds. If consent is NOT given please give reasons:

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**Signed**: …………………………………………. **Date**: …………………..

(Individual)

Please return completed, approved form to **ICB Governance Team,** [**declarations@cheshireandmerseyside.nhs.uk**](mailto:declarations@cheshireandmerseyside.nhs.uk)

**Reviewed & Added to Register – Mitigation agreed where relevant**

**Signed:** ………………………………………….. **Date:** …………………..

(Associate Director Corporate Affairs & Governance)

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| **Type of Interest** | **Description** |
| **Financial Interests** | This is where an individual may get direct financial benefits from the consequences of a decision. This could, for example, include being:   * A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations * A shareholder (or similar owner interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations. * A management consultant for a provider * In secondary employment: **details of secondary/ additional employment must include value (hourly rate or one-off payment) & time commitment in that role** * In receipt of income from a provider * In receipt of a grant from a provider * In receipt of any payments (for example honoraria, one off payments, day allowances or travel or subsistence) from a provider * In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and * Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider). |
| **Non-Financial Professional Interests** | This is where an individual may obtain a non-financial professional benefit from the consequences of a decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:   * An advocate for a particular group of patients * A provider with special interests e.g., in dermatology, acupuncture etc. * A member of a particular specialist professional body (although routine GP membership of the RCGP, BMA or a medical defence organisation would not usually by itself amount to an interest which needed to be declared); * An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE) * A medical researcher. |
| **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. This could include, for example, where the individual is:   * A voluntary sector champion for a provider * A volunteer for a provider * A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation * Suffering from a particular condition requiring individually funded treatmen * A member of a lobby or pressure groups with an interest in health. |
| **Indirect Interests** | This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a decision (as those categories are described above). For example, this should include:   * Spouse/ partner * Close relative e.g., parent, grandparent, child, grandchild or sibling * Close friend * Business partner. |