

DECLARATION OF INTEREST FORM

Title of paper	
Meeting details	
Report author and job title	
Executive summary	
Recommendations	
Outcome of Impact	
Assessments completed (e.g.	
Quality IA or Equality IA)	
Outline engagement – clinical,	
stakeholder and public/patient	



Management of Conflicts of	
Management of Connicts of	
Interest	
Assurance departments/	
organisations who will be	
affected have been consulted:	
anceted have been consulted.	
Report previously presented at:	
Risk Assessments	