# SDCEPConflicts of Interest

## Policy on Potential Conflicts of Interest

SDCEP’s Declaration of Interests is the process by which an individual formally registers any financial or non-financial interests that might affect, or may reasonably be perceived to affect, their objectivity in contributing to the work of the Scottish Dental Clinical Effectiveness Programme (SDCEP). Contributors, including members of Guidance Development Groups, Short-life Working Groups or Steering Groups, peer reviewers and SDCEP staff are required to complete and sign the following Declaration of Interests Form annually.

### Declaring Interests

Interests that should be declared, which may or may not give rise to a conflict of interest, include but are not limited to:

* Paid and unpaid employment, positions, offices held and directorships;
* Consultancy and advisory roles;
* Business activities and investments;
* Research and academic activities including publications;
* Intellectual property;
* Where an individual’s institution has a relationship with a commercial company;
* Gifts and financial or non-financial support (e.g. to attend a meeting, conference or event);

particularly where these interests relate to healthcare organisations, institutions, professional bodies and commercial healthcare companies.[[1]](#footnote-2) The interests of partners and close family members should also be declared.

Interests that are not, or would not be perceived to be, relevant to the work of SDCEP need not be declared. These might include shares in companies unrelated to healthcare or membership of sport or recreation societies, for example.

The aim of the Declaration of Interests is for full disclosure and transparency in SDCEP processes. Therefore, interests should be included even if there is any doubt as to whether they are relevant. Declared interests do not necessarily give rise to a conflict of interests.

The relevant time period for interests to declare is one year prior to the declaration and one year following the declaration. Should an individual’s interests change during the course of their participation in the Programme’s work, SDCEP should be notified as soon as possible.

### Conflicts of Interest

Any declared interest thought likely to constitute a conflict of interest (i.e. deemed likely to influence the individual’s ability to give an objective opinion) will be considered at relevant SDCEP group meetings to decide whether and how this should limit the extent of the individual’s participation in the work (e.g. exclusion from certain decisions or stages, or complete withdrawal from a process). Individuals with a conflict of interest are ineligible to chair a group.

### Personal Data

The contents of completed Declaration of Interests forms may be shared within guidance development groups, the steering group and, only in exceptional circumstances, with the National Dental Advisory Committee, for the purpose of deciding whether a declared interest represents a conflict. Completed Declaration of Interests forms will be retained by SDCEP according to the NHS Scotland data retention policy and will be available for public inspection on request. A summary of potential conflicts of interest, management decisions and any action taken will be made available on the SDCEP website with the publication to which it relates. SDCEP’s [Privacy and Data Protection Notice](http://www.sdcep.org.uk/privacy-policy/) provides information about how personal data is collected, used and stored ([www.sdcep.org.uk/privacy-policy/](http://www.sdcep.org.uk/privacy-policy/)).

## Declaration of Interests Form

Please state your interests, current and planned, particularly where these interests relate to healthcare organisations, institutions, professional bodies and commercial healthcare companies. You should also include those of your partner and close family members, stating when this is the case.

Please provide a brief explanation of the interest, indicating, where applicable, whether the interest relates specifically to the topic or remit of a particular SDCEP project (e.g. a guidance topic).

### Paid Employment, Posts and Consultancy

Please state **ALL** paid employment or work for which you (or your partner or close family member) receive remuneration from an organisation or institution or a commercial company with an interest related to the project or the work of SDCEP.

This should include:

* employment and/or self-employment held (including NHS, private practice, NES and academic posts)
* paid office held
* directorships
* business partnerships
* consultancy, lecture fees or other fee paid work

where these relate to healthcare.

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| Details of interest(s), stating whether or not specifically related to SDCEP topic(s).  *e.g. Consultant in Restorative Dentistry, [name of Dental Hospital]*  *Lecturer in Oral Surgery, [name of University]*  *NES employee*  *GDP, [name of practice] - NHS and private general practice*  *Private practice at [name of practice], specialising in [named dental services]*  *Private training provider for [named dental speciality]*  *Director of company providing training in dentistry*  *Consultancy fee from [name of healthcare company] for attending advisory board meetings about [name of product]*  *Lecture fee from [name of healthcare company]*  (If you (or your partner or close family member) do not hold any such positions, state ‘none’) |

### Research Support

Have you or your research group received support from a commercial company or other organisation, institution or funding body with an interest related to the project topic or the work of SDCEP, including:

* research grants or awards
* other research support (e.g. equipment, facilities, research assistants, paid travel to conferences)

where these relate to healthcare? **Yes  No**

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| If ‘Yes’, please provide details of interest(s), stating whether or not specifically related to SDCEP topic(s):  *e.g. Research grant from [name of healthcare company] to fund research project on [name of topic]* |

### Intellectual Property

Do you (or your partner or close family member) have any intellectual property rights that might be enhanced or diminished by the outcome of the project or the work of SDCEP, including:

* patents, trademarks or copyrights (including pending applications)
* proprietary know-how in a substance, technology or process

where these relate to healthcare? **Yes  No**

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| If ‘Yes’, please provide details of interest(s), stating whether or not specifically related to SDCEP topic(s):  *e.g. Pending patent application for [name of dental technology]* |

### Investment interests

Do you (or your partner or close family member) have any current investments in a commercial company or other organisation or institution with an interest related to the project or the work of SDCEP, including:

* shares and securities
* business investments

where these relate to healthcare? **Yes  No**

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| If ‘Yes’, please provide details of interest(s), stating whether or not specifically related to SDCEP topic(s):  *e.g. Partner has shares in [name of healthcare company] –produce [name of product]* |

### Non-financial interests

Do you (or your partner or close family member) have any non-financial interests in a commercial company or other organisation, institution or professional body with an interest related to the project or the work of SDCEP, including:

* unpaid positions held
* committee or society membership
* gifts, expenses and hospitality
* support to attend meetings/conferences or other non-financial support

where these relate to healthcare? **Yes  No**

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| If ‘Yes’, please provide details of interest(s), stating whether or not specifically related to SDCEP topic(s):  *e.g. Chair of the [name of committee]* |

### Any other interests

Is there any other aspect of your background or present circumstances (or those of your partner or close family member) not addressed above (e.g. intellectual, personal or institutional interests) that might affect or reasonably be perceived to affect your objectivity or impartiality regarding the project or the work of SDCEP (where these relate to healthcare)? **Yes  No**

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| If ‘Yes’, please provide details of interest(s), stating whether or not specifically related to SDCEP topic(s):  *e.g. Publication directly relevant to topic*  *Employing institution receives funding from [name of healthcare company]* |

Having read the Policy on Potential Conflicts of Interest, I declare the interests stated above and agree to the terms of the policy.

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| --- | --- | --- |
| Name |  | |
| Signature |  | |
| Date of declaration |  | |
| Relationship to SDCEP  *(e.g. group member, advisor, reviewer, researcher, member of SDCEP staff)* |  | |
| Period covered by declaration |  | |
| Date received by SDCEP (for office use only) |  | Authorised by: |

1. May also include private healthcare providers, companies involved in products that might affect oral health such as food, alcohol and tobacco industries, and companies with an interest in products, technologies and services that are relevant to healthcare. [↑](#footnote-ref-2)