

**Tool: Tool 1.1b: DISCLOSURES1**

**Section in Planner: Phase 1, Step 1 (1.1b)**

**Why is this important?**

If you begin planning with a very small team, you may decide to forego formally declaring conflicts of interest - or assume that none exist. However, as your initiative develops and participation expands to include greater representation from your community, e.g. potential partner agencies, private or public funding or sponsorship, health professional consultants, and stroke advisory members, it becomes increasingly important that everyone is clear on the expectations and operation of the planning committee as well as the proposed implementation plan. This includes being transparent about any perceived advantages or benefits to individual planning team members.

**How to use this tool:**

A sample disclosure form is provided. It raises a number of factors, most related to commercial and financial disclosures. Not all potential conflicts are financial. Use and adapt this template as necessary by adding or removing factors important to your own planning context.

**User Comments:**

*“I think this section can be made into a document and given to every member on the planning committee to sign.”* (Program Coordinator)

1 *Adapted from CAN-IMPLEMENT Toolkit*

Harrison MB, van den Hoek J, Graham ID. CAN-Implement: planning for best-practice implementation. 1st edition. Philadelphia, PA: Lippincott, Williams and Wilkins; 2014.

Harrison MB, Graham ID, van den Hoek J, Dogherty EJ, Carley ME, Angus V. Guideline adaptation and implementation planning: a prospective observational study. Implement Sci. 2013;8:49.

**Phase 1, Step 1: Disclosures**

|  |  |
| --- | --- |
| **NAME:** |  |
| **NAME of Project team or task force** |  |

The following questions are designed to allow project team members to disclose potential conflict(s) of interest with respect to program activities. A conflict of interest might include:

* planning team member or partner involvement in the development or endorsement of any of the programs or program recommendations
* relationships with companies whose products or services are related to the program
* perceived competitive advantages or benefits favouring a planning team member or partner
* terms and conditions related to sponsors, funding partners or stakeholder contributions
* financial interests or relationships, e.g. honoraria, consultancies, employment, or stock ownership

**Answer each question by circling either “Yes” or “No”. If you answer "YES" to any question, please describe the nature of the interest and/or relationship and identify the relevant commercial entity.**

|  |  |  |  |
| --- | --- | --- | --- |
| **1. PARTICIPATION IN DEVELOPMENT of PROGRAM/RECOMMENDATIONS**  Have you been involved in the development on any of the program recommendations? | **Yes** | | **No** |
| If YES, please identify the program and describe your involvement: | | | |
| **2. ENDORSEMENT of RECOMMENDATIONS**  Have you directly participated in any processes to formally endorse any of the program recommendations? | **Yes** | | **No** |
| If YES, please identify the program and describe your involvement: | | | |
| **3. EMPLOYMENT**  Are you or have you been employed by any entity having a commercial interest in any of the programs under consideration? | **Yes** | | **No** |
| If YES, please describe your involvement: | | | |
| **4. CONSULTANCY**  Have you served as a consultant for any entity having a commercial interest in any of the programs under consideration? | **Yes** | | **No** |
| If YES, please describe your involvement: | | | |
| **5. MANAGEMENT**  Do you have or expect to hold a managerial position in or serve on the Board of directors or an advisory board for any entity having a commercial interest in any of the programs under consideration? | **Yes** | | **No** |
| If YES, please describe your involvement: | | | |
| **6. OWNERSHIP INTERESTS – PART A**  Do you have any ownership interests (including stock options) in any entity, the stock of which is not publicly traded, which has a commercial interest in any of programs under consideration? | **Yes** | | **No** |
| If YES, please describe your involvement: | | | |
| **7. OWNERSHIP INTERESTS – PART B**  Do you have any ownership interests (including stock options but excluding indirect investments through mutual funds and the like) valued at [$xxxx] or more in any entity that has a commercial interest in any of the programs under consideration? | **Yes** | | **No** |
| If YES, please describe: | | | |
| **8. RESEARCH FUNDING**  Are you currently receiving, or have you received research funding from any entity that has a commercial interest in any of the programs under consideration? | **Yes** | **No** | |
| If YES, please describe: | | | |
| **9. HONORARIA**  Have you been paid honoraria or received gifts of value equal to or greater than [$xxxx] per year from any entity having a commercial interest in any of the programs under consideration? | **Yes** | **No** | |
| If YES, please describe: | | | |
| **10. OTHER POTENTIAL CONFLICT(S) OF INTEREST** | **Yes** | **No** | |
| If YES, please describe: | | | |

**Name**

**Signature:**

**Date:**