

## Declaration of Interests Form

### Transvaginal Mesh Case Record Review

Please ensure that this form is completed with all interests that may be relevant, regardless of timescales.

I, Irene Brown, as a member of the Transvaginal Mesh Case Record Review Panel, hereby declare my private and business interests as at 31<sup>st</sup> August 2020 are as follows:

| Potential Conflict of Interest   | Yes/No           | If Yes, Please Provide Details   |
|--|------------------|--|
| <p>Sources of Income:</p> <p>Do you receive income from outside your employer and Scottish Government that could reasonably raise an expectation of a conflict of interest with your duties of independence and impartiality as part of the review Panel?</p>  | <p><b>No</b></p> |  |
| <p>Office Holder:</p> <p>Do you hold office in a public or private organisation that reasonably raises an expectation of a conflict of interest with your duties as part of the review Panel?</p>  | <p><b>No</b></p> | <p>I was involved in an administrative role in the Investigative Review into the process of establishing, managing and supporting Independent Reviews in Scotland –published October 2018.</p> |
| <p>Trusteeships:</p> <p>Are you a Trustee or a Director of any trustee company in which a member of your family is a beneficiary that could reasonably raise an expectation of a conflict of interest with your duties as part of the review Panel?</p>  | <p><b>No</b></p> |  |
| <p>Agreements:</p> <p>Are you, or a member of your immediate family, party to any contract, agreement or understanding that gives rise to an obligation or an expectation of reward that could reasonably raise an expectation of a conflict of interest with your duties as part of the review Panel?</p> | <p><b>No</b></p> |  |

|  |           |  |
|--|-----------|--|
| <p>Other Interests:</p> <p>Do you, or any member of your immediate family, hold any other substantial financial or other interest that could raise an expectation of a conflict of interest with your duties as part of the review Panel?</p>                                    | <p>No</p> |  |
| <p>Director's Duties:</p> <p>Have you ever been disqualified from acting as a Director, or acting in the management of a company?</p>  | <p>No</p> |  |
| <p>Medical Interests:</p> <p>Have you, or any member of your immediate family, been subject to any form of medical treatment which forms the subject of this review which could raise an expectation of a conflict of interest with your duties as part of the review Panel?</p> | <p>No</p> |  |

I, Irene Brown, hereby declare that to the best of my knowledge and belief the information I have provided above is true and correct.

I undertake to advise fellow members of the review Panel in writing if a conflict or potential conflict of interest arises during the course of this review and, if it is considered appropriate by the Panel, to thereafter stand down in any decision making process in which I may be compromised.

I understand that this information will be published on the Case Record Review website.

Signature: 

Date: 31 August 2020