

**Community Pharmacy Staffordshire**  
**&**  
**Stoke-on-Trent LPC**

**Annual Declaration of Interest (Dol)**

To ensure that each member complies with the requirement of the Code of Declaration of Interest, the following actions are required.

**Register of interest**

The declarations should be completed annually at the April meeting or the next available after April if a meeting is not held in April. New members should complete the declarations at their first meeting and again at the April Meeting. Any changes should be added to the register as soon as possible – it is the responsibility of each member to update their own Dol. In addition, at each meeting there will be an agenda item requesting the Dol specific to that agenda. This item will usually follow the apologies for absence.

Although it is the responsibility of each member to up-date their own Dol information. However, the Chief Operating Officer will be responsible for all operational aspects of this guideline.

**Please complete each section as fully as possible. You are also advised to declare interests which relate to your spouse and children. The register will be held by the chief officer to the committee. You should notify the chair of the chief officer in writing of any variations to the original entry as soon as possible. In all circumstances, the responsibility to notify such interest lies with each individual member**

<b>FULL NAME</b> SIMON HAY
<b>MAIN EMPLOYMENT</b> - Please give the name and address of your main employer. CP STAFFORDSHIRE AND SOT LPC
<b>SELF EMPLOYMENT</b> - Please give the name and address of any other employer for whom you work. If you work on a self-employment basis this should also be indicated.

CLINICAL ADVISER FOR NHS ENGLAND (GAM)  
OCCASIONAL SELF EMPLOYED LOCUM

**DIRECTORSHIP** - Please give the name and address of any company of which you are, or have been, an Executive or Non-Executive Director in the last 5 years.

CENTRAL HEALTH SOLUTIONS

40 BEACON BUILDINGS

LEIGHTS WOOD RD

ALDRIDGE WS9 2AR

**SIGNIFICANT FINANCIAL INTERESTS** - Please give the name and address of any company or organisation not shown in 3 (above) in which you have (or have had in the last 5 years) an investment of any share capital. Interests which may cause conflict can include owning or being a major shareholder in a company associated with pharmaceuticals or marketing.

NONE

**MEMBERSHIP OF PUBLIC BODIES** - Please give the name of any local authority of which you are a member

**BENEFITS IN KIND RECEIVED FROM PHARMACEUTICAL COMPANIES IN THE LAST FIVE YEARS** - exclude 1. Articles of low intrinsic value 2. Modest hospitality such as lunches in the course of working, provided that they are not on a scale unlikely to be seen as an inducement