

British Society for Allergy and Clinical Immunology
Declaration of Interest Form for covering the last three year period.

Please read the BSACI policy document on 'Conflicts of Interest' and then complete all sections on this form and return it either by email to Ben@bsaci.org or by post to BSACI, Studio 16 Cloisters House, 8 Battersea Park Road, London SW8 4BG even if you have nothing to declare.

Full name: Susan Leeds Date 16/9/20.

Please tell us all the BSACI Committees/Groups you are a member of:

BSACI SOCC, Paediatric Committee

Treasurer, Director, Trustee.

I have no conflict of interest

Personal Benefits

This section includes payment/fees (over £250) eg: for lectures, advisory committees or consultancy services, either on a regular or irregular basis from which you will personally benefit. Benefits in kind should also be registered.

Company	Reason for payment	Date started	Date completed or ongoing
Thermo Fisher	Speaker fees	2018	ongoing.
Mylan	Speaker fees	2018.	2018
Nutricia	Speaker fees	2017	2017
Alk Abello.	Advisory Board	2017	2017
			Please continue on the following pages
Company	Reason for payment	Date started	Date completed or

			ongoing
Personal benefits continued			

Personal Travel Grants/Expenses for Conferences etc..

Company	Description of benefit
Nutricia.	Sponsorship to attend conference. 2018.
ALK Abello	Sponsorship to attend conference 2017
Nutricia	Sponsorship to attend conference 2017

Personal Shares

Company Shares	Shares still held

Non-Personal Interests

For funds/fees that are made to your department for salaries, research, equipment, education etc. Also includes benefits in kind and fees for your own work if you do not benefit personally.

Company	Reason for support	Date started	Date completed or ongoing
ALK Abello	Sponsorship for Regional Network Day	20 18 17	2020 .
Nutricia	Sponsorship for Regional Network Day	2017	2017

Other potential conflicts of interest

Commercial interests of spouse/partner and membership of relevant outside agencies, organizations, including pressure groups etc.

Company	Reason for support	Date started	Date completed or ongoing?

Additional interests

Please list all activities which are upcoming which you are sure will take place.

Company	Reason for support	Start date

I have read the BSACI policy document on **Conflicts of Interest** and declare that the information I have given is a true indication of interests.

SIGNATURE:..... *S Leech*

PRINT NAME:..... *Dr. Susan Leech*

DATE:..... *16/9/20*

Please return this form by email to Ben@bsaci.org or by post to:

BSACI office
Studio 16, Cloisters House
8 Battersea Park Road
London
SW8 4BG

Confidentiality Agreement

To be signed by all BSACI committee members and working groups

This agreement covers all those who have sight of documents, or are party to discussions, relating to the development of guidelines before public consultation. This includes Standards of Care Committee members, BSACI Trustees and other members of BSACI Committees, especially those involved with guideline development, and BSACI staff and associates.

1. I undertake to BSACI that I shall:
 - a. Keep all confidential information strictly confidential
 - b. Not use any confidential information for any purpose other than participating in the deliberations of any BSACI Committee
 - c. Not disclose any confidential information to any commercial industrial party without the prior written consent of BSACI and in the event that such disclosure is permitted I shall ensure that such party is fully aware of and agrees to be bound by these undertakings
 - d. Not disclose the deliberations of any BSACI guideline Committee to any other person without the explicit consent of the Chair of the Committee.
2. The undertakings set out in paragraph 1 above ('the undertakings') shall not apply to the use or disclosure of information that:
 - a. At or after the time of disclosure or acquisition is in the public domain in the form supplied otherwise than through a breach of any of the undertakings, or
 - b. Was lawfully within my possession before its disclosure to me by the BSACI or the Standards of Care Committee or any other guideline committee provided that the source of such information was not bound by, or subject to, a confidentiality agreement with BSACI; or
 - c. I am required to disclosure by any court of competent jurisdiction or any government agency lawfully requesting the same, provided that BSACI is notified in advance of such disclosure; or
 - d. Is approved for release by prior written authorization from BSACI.

Signed  Date 16/9/20

Print name..... Dr. Susan Leech