## Annex B: Template Declaration of interests for Practice Partners and employees

| Name:                                   | Dr Rosario Vega  |                       |      |  |
|---|--|-----------------------|------|--|
| Position within, or with, the Practice: | Position within, or relationship with, the Practice:   |                       |      |  |
| Detail of inte                          | Detail of interests held (complete all that are applicable):   |                       |      |  |
| Type of Interest*                       | Description of Interest (including for indirect Interests, details of the relationship with the person who has the interest)         | Date interest relates | Y #  | Actions to be taken to mitigate risk (to be agreed with Practice Manager and Senior Partner)                                       |
| attachment for details                  |  | From & To             | & To |  |
| Financial<br>Interest                   | Shareholder in Novus Health which holds the contract to perform various medical services such as physiotherapy in the Wakefield area | 2009                  | date | Novus would only be awarded services through strict tendering procedures as laid down by the ICB which allow for fair competition. |
|   |  |                       |      |  |

organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Practice holds. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that the The information submitted will be held by the Practice for personnel or other reasons specified on this form and to comply with the

and timely declarations then civil, criminal, or internal disciplinary action may result. the Practice Manager as soon as practicable and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to

given please give reasons: I do I do not [delete as applicable] give my consent for this information to published on registers that the Practice holds. If consent is NOT

Signed: R VEGA Date: 4/10/2012

(Senior Partner) Signed: Position: Senior Partner Date: 4) 10/2022

Please return to the Practice Manager to provide advice, support, and guidance on how conflicts of interest should be managed, and administer associated administrative processes