

# Public Declaration of Interests The European Patients' Forum Board Members

## **Public Declaration of Interests**

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Name: Erin Davies

Organisation: EPF Youth Group

Country: United Kingdom

do hereby declare on my honour that, to the best of my knowledge, the only direct or indirect interests I have in healthcare industries are those listed below:

Please indication N/A (Not applicable) as appropriate

2.1 Employment in the healthcare industry

Period	Company	Job title
N/A		

#### 2.2 Consultancy

• Consultancy to a company shall mean: any activity where the board member provides advice (including training on a one to one basis) to a company regardless of contractual arrangements or any form of remuneration.

Period	Company	Subject Matter	1
N/A			1

- 2.3. Consultancy/advisory role on patient-related activities in the last year
  - The board member provides advice or participates in consultations regarding patient-related
    activities of a company that are strictly non-commercial (e.g. educational seminars,
    preparation and participation in patient meetings/trainings, development of non-product
    patient specific materials, participation in trainings of a company staff on patient-centricity
    etc.)

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## Strategic

Period	Company	Subject Matter
N/A		

## **Advisory Role**

Strategic advisory role for a company shall mean: any activity where the board members participating (with a right to vote/influence the outputs) in a(n) (scientific) advisory board/steering committee with the role of providing advice/expressing opinions on the (future) strategy, direction and development activities of a healthcare company, either in terms of general strategy or product related strategy, regardless of contractual arrangements or any form of remuneration.

Period	Company	Product	Therapeutic Indication
N/A			

#### 2.4 Financial Interests

Period	Company	Subject Matter
N/A		

# 2.5 Principal Investigator

Period	Company	Subject Matter
N/A		

## 2.6 Investigator

Period	Company	Subject Matter
N/A		

2.7 Grant / Funding to Organisation /Institution in 2020 (This is the organisation which nominated you to become a member of EPF)

Company	Subject Matter and amount	



2.8 Close Family Me	mber Interest	Interest	
N/A			

I confirm the information declared on this form is accurate to the best of my knowledge and I acknowledge that my information will be stored electronically and published on the EPF website.

Full Name	Erin Paige Davies
Date	23/04/2021