## **CODE OF CONDUCT – DECLARATION OF INTERESTS**

## **Community Pharmacy Dorset COMMITTEE**

Name: Elizabeth Hall

| 1. | Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership  | n/a   |
|----|---|---|
| 2. | Remunerated employment or offices   | Part-time Pharmacist for Rowlands Pharmacy,<br>St. Marys Road, Ferndown.<br>Part-time Primary Care Development Lead for<br>Dorset Healthcare, Sentinel House, Poole |
| 3. | Remunerated Consultancy(s)  | n/a   |
| 4. | Remunerated work performed under contract   | n/a   |
| 5. | Names of companies or other bodies in which I have an interest, either on my own account, my spouse or infant children, for a beneficial interest in share holdings greater than the 10% of the share capital | n/a   |
| 6. | Remunerated contributions to professional and scientific publications   | n/a   |
| 7. | Membership of other pharmaceutical bodies   | n/a   |

I agree to update this document at any time there is a change in my interests

Signed: E S Hall

Date: 25<sup>th</sup> March 2024