

The International Shared Decision Making Society's (ISDMS) Declaration of Interest Form is used to manage conflicts, promote transparency, and adopt unbiased decisions that are in the best interest of the collaboration. Effectively managing interests – and identifying potential conflicts – is essential if policy makers, healthcare professionals, and the patients/public, are to maintain confidence in our work.

Why must I file? The information you provide on this form will be used to assess if you have

any potential conflicts of interest. Information will be disclosed on the

ISDMS website in the interest of transparency.

Who must complete it? Members of the executive board of ISDMS.

When must I file? The report is due prior to assuming a position and updated yearly.

Reporting period? Report the required information for the 3 years preceding the date you com-

plete this form.

Questions(?) If you have any questions about how to complete this form, please contact

kirsten.mccaffery@sydney.edu.au

What are the different types of interest?

Direct Interests: When there is, or could be perceived to be, an opportunity for a person in-

volved with ISDMS work to benefit. This benefit could be financial or non-financial. Non-financial is described as increasing or maintaining their professional reputation (e.g., advocate for a particular group, holds office of authority in professional organization, actively involved in an ongoing research project aimed at determining the effectiveness of a matter under consideration;

published a clear opinion about the matter under consideration).

Indirect Interests: When there is, or could be perceived to be, an opportunity for a third party

closely associated with the person in question to benefit. This could be through a close association with another person or organization that has a financial or non-financial interest (defined above) and could benefit from a decision the person is involved in making through their work on an ISDMS com-

mittee.

What are the responses to declared interests?

- a. No action other than the process of open declaration.
- b. Partial exclusion from recommendations and decision-making on the matter relating to the interest may provide advice because of their expert knowledge;
- c. Complete exclusion from having input to a specific topic.

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Name: Martin Christian Härter				
Position/Title: Prof. Dr. med. Dr. phil. Dipl. Psych.				
Employer: University Medical Center Hamburg-Eppendorf	Country: Germany			
Reporting Status: New	Email: m.haerter@uke.uni-hamburg.de			

For <u>each</u> statement below, check Yes or No to describe your situation <i>in the last 3 years or next</i> 12 months which may reflect a direct or indirect interest:		
I. I have reportable assets or sources of income for myself, my spouse or my dependent children (research support, scholarships, awards, consulting fees, royalties, patients)		
II. I have reportable liabilities (debts) for myself, my spouse or my dependent children		
III. I have a reportable outside position(s) for myself		
IV. I have reportable agreements or arrangements for myself		Х
V. I have reportable gifts or travel reimbursements for myself, my spouse or my dependent children		Х

If you selected **Yes** for <u>any</u> statement, you must describe the reportable interests that you have below

Type of interest	Description of interest	Date interest began	Date interest ceased	Comments/explanation (for ISDMS)
Direct (non-fi- nancial)	Grant support from different public funding bodies in Germany (Federal Ministry of Health / Federal Ministry of Education and Research / Innovation Fund / Health Insurance Funds)	2001	ongoing	I am involved in various research projects regarding the assessment and implementation of patient-centred care and shared-decision making.
indirect	I have a co-position as director of the scientific advisory board of the German Agency for Quality in Medicine (ÄZQ, Berlin)	March 2016	ongoing	The agency is responsible for the development and maintenance of National Clinical Practice Guidelines. Patient-centred care and shared decision-making are approaches with great importance for the formulation of clinical recommendations.

I certify that the statements I have made on this form are true, complete, and correct to the best of my knowledge. I do give my consent for this information to be published on the ISDMS website.

Signature W. Hard	Date of Completion 20.09.2022
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