



Appendix A. Competing Conflict of Interest Form

Your name:	Karen Macpherson
Your INAHTA member agency name:	Healthcare Improvement Scotland
Indicate your position on the INAHTA Board of Directors and the term start/end date:	Board Member September 2022 to September 2024
Do you currently hold any position of governance or leadership in a global/international or regional HTA-related organization?	No
If yes, please indicate the name of the organization, your role or position, and the term start/end dates.	
Do you have any financial interests that conflict with any activities planned or underway in INAHTA?	No
I consent to have this CCI form posted publicly on the INAHTA website	Yes

Karen Macpherson

Signature

7th October 2021

Date