

Declaration of Interest

External Author Form



A. General Information

Full Name: Samir Kumar Sinha

Date (MM/DD/YYYY): 3/23/2021

B. Declaration of Interest

Please fill out the following table by indicating whether you or your institution have received compensation, regardless of the amount, in the form of payment or services, from entities in the health care, public health, or other related arenas that could be perceived to influence your collaboration with the Science Table, or related aspects. Please report all compensation that has been received in the last 3 years prior to your collaboration with the Science Table.

If you have selected 'Yes' for any of the categories below, please indicate whether the compensation is related to COVID-19 or not, the name of the entity providing the compensation, and an explanation. If you have more than one relationship for each Category, please ensure to include all of them by selecting the '+' sign at the end of each row.

Category	No	Yes, paid to you	Yes, paid to your institution	Related to COVID-19?		Entity	Explanation
				No	Yes		
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canadian Institutes for Health Research	Finding the Right Balance: Implementing Family Presence Policies in Ontario Long-Term Care Homes (Principal Investigator)
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes for Health Research	Development of Machine Learning Models to Characterize Homebound Status in Older Adults in Canada (Co-Investigator)
Consulting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ministries of Health, Long-Term Care and Seniors Affairs and Accessibility	Consulting and Advisory Services related to Issues Related to Seniors in Ontario
Board membership	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Telus	Medical Advisory Board Member
Board membership	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Closing the Gap Healthcare	Advisory Board Member
Board membership	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bayshore Health	Medical Advisory Board Member
Employment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pfizer Canada	Delivered a Series of COVID-19 Vaccine CME Presentations

Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes for Health Research	2020 Best Brains Exchange pm Regulation of the Ontario Retirement Homes Sector Webinar
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ontario Long-Term Care Association	2020 COVID-19 Pandemic Planning Webinar
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Alberta Continuing Care Association	2020 COVID-19 and Long-Term Care Webinar
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Canadian Physiotherapy Association	2019 Keynote Lecture at Annual Conference
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Health PEI	2019 Keynote Lecture at Annual Geriatrics Conference
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Medical Association	2019 Presentation at CMA Health Summit
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pri-Med	2019 Keynote Lecture at Annual Conference
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	New Brunswick Association of Nursing Homes	2019 Keynote Lecture at Annual Conference
Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ontario Retirement Communities Association	2018 Keynote Lecture at Annual Conference
Payment for manuscript preparation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Patents	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Royalties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Payment for development of educational presentations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pfizer Canada	Provided Geriatrics Expertise related to the Development of COVID-19 Vaccine CME Materials
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Payment for writing or reviewing any reports or publications	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	National Research Council	Evidence Brief related to Ageing-in-Place
Provision of writing assistance, equipment, software, or administrative support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Expert testimony	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Thomson Rogers	Expert Advice Regarding COVID-19 and

							Congregate Care Settings
Stock/stock options	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ministry of Health, Taiwan	Airfare/Hotel Expenses to Attend/Present at 2019 Global Health Forum
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	University of Alberta	Airfare/Hotel Expenses to Deliver the 2019 Dr. Geral Zetter Memroail Lecture
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Commonwealth Fund	Airfare/Hotel Expenses to Attend/Present at 2018 Commonwealth Fund International Symposium
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Organization for Economic Co-Operation and Development (OECD)	Airfare/Hotel Expenses to Attend/Present at 2018 Lausanne V Dialogue
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Queen's University	Travel Expenses to Deliver the 2018 H. Garfield Lecture
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	National Health Service, England	Airfare/Hotel Expenses to Attend/Present at 2018 Frailty First Conference
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Foundation for Healthcare Improvement	Airfare/Hotel Expenses to Attend/Present at 2018 National Healthcare Leadership Conference
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Frailty Network	Airfare/Hotel Expenses to Attend/Present at 2018 International Frailty Common Data Elements Meeting
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	National Healthcare Group, Singapore	Airfare/Hotel Expenses to Attend/Present at 2018 Singapore Health and Biomedical Conference
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Agency for Integrated Care, Singapore	Airfare/Hotel Expenses to Attend/Present at 2018 Global Conference on Integrated Care

C. Other Relationships

Are there any other relationships or activities that could be perceived to influence your collaboration with the Science Table (COVID-19 related or not)? Please select one of the following:

- No, there are no other relationships/conditions/circumstances that present, or may be perceived to present, a potential conflict of interest.
- Yes, there are relationships/conditions/circumstances that present, or may be perceived to present, a potential conflict of interest.

If you have selected 'Yes', use the following table to indicate whether the relationship is related to COVID-19 or not, provide the name of the entity (if applicable), and an explanation describing the nature of the relationship. If you have more than one relationship, please ensure to include all of them by selecting the '+' sign at the end of each row.

Category	Related to COVID-19?		Entity	Explanation
	No	Yes		
Relationship	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.

D. Acknowledgement

I certify that the above information contained in this Declaration of Interest is true and correct to the best of my knowledge.

Full Name: Samir Kumar Sinha

Date (MM/DD/YYYY): 3/23/2021