

ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Mark Toynbee

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author’s relationships/activities/interests as they relate to the current manuscript only.

The author’s relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	UK National Institute for Health Research (NIHR) Health Services and Delivery Research Programme	Grant 15/11/16 to the University of Oxford
		NIHR Applied Research Collaboration Oxford and Thames Valley at Oxford Health NHS Foundation Trust	Grant to the University of Oxford
Time frame: past 36 months			

2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Maïke van Niekerk

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Nicholas Magill

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Rowan Harwood

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	NIHR	NIHR HTA PCCPI panel (2014-2017)

Please place an "X" next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Professor Sarah E Lamb

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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11	Stock or stock options	<input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> None	
13	Other financial or non-financial interests	NIHR	Chair of the NIHR HTA CET Board (2010-2016) and on the NIHR HTA Commissioning Board (2002-2008), NIHR HTA Systematic reviews and economic modelling board 2007, NIHR HTA Emergency and Trauma Board (2007-2008), NIHR NHS HTA Commissioning Strategy Group (2005-2008)

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Sasha Shepperd

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> None	
13	Other financial or non-financial interests	NIHR	NIHR HSDR commissioning panel member (2016-2019)

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Simon Walker

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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13	Other financial or non-financial interests	NIHR	NIHR Research for Patient Benefit Funding Committee for Yorkshire and the North East Region (2017-2021), NIHR Policy Research Committee Funding board (June 2022-present);

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Ana Duarte

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Annabel Price

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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Date: 31/07/2024

Your Name: Chris Dickens

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

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13	Other financial or non-financial interests	NIHR	SW RfPB committee (2013-2016)

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Date: 31/07/2024

Your Name: Chris Frost

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

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Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	UK National Institute for Health Research (NIHR) Health Services and Delivery Research Programme NIHR Applied Research Collaboration Oxford and Thames Valley at Oxford Health NHS Foundation Trust	Grant 15/11/16 to the University of Oxford Grant to the University of Oxford
Time frame: past 36 months			

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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ICMJE DISCLOSURE FORM

Date: 31/07/2024

Your Name: Colm Owens

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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Date: 31/07/2024

Your Name: Daniel Lasserson

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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13	Other financial or non-financial interests	NIHR	NIHR In Practice Fellowship Committee (2015-2020) and the NIHR HTA Clinical Evaluation and Trials committee (2016-2021)

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Date: 31/07/2024

Your Name: Ian R. White

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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Date: 31/07/2024

Your Name: Jane Walker

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

Manuscript number (if known):

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Date: 31/07/2024

Your Name: Michael Sharpe

Manuscript Title: Proactive Integrated Consultation-Liaison Psychiatry for older medical inpatients: The HOME Study RCT

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