Integrated Care Record Right to Object Form

The Coventry and Warwickshire Integrated Care Record (ICR) is a way of bringing together all your separate records from the different organisations involved in your health and social care. It's confidential and different to anything you might have heard of before.

It will let health and social care professionals see relevant information about the care and treatment you've had across all services. Having a more joined-up view of your information will help them give you better, safer care.

Health and social care organisations in the neighbouring areas of Birmingham and Solihull and Herefordshire and Worcestershire will also be able to view your information if necessary for care you receive there.

All staff must follow the law on keeping your information confidential. Each time they look at your records this will be recorded to make sure they're only looking at the right information, for the right reasons.

If you don't like the idea

If you are aged 16 or above, you have the right to object at any time. Please see 'Some things to note' below for information if you are under 16.

Please think carefully before objecting and take a moment to read the important information below.

If you want to object, just complete the form below and email or post it to the Shared Care Record central team. You'll find the address details on the form.

Once we receive it, we'll check your details to make sure they're correct and you're on our system. If so, we'll block your health and social care records from being available to view through the Shared Care Record. Depending on the contact address you've given us, we'll then let you know by post or email that we've done it.

Some things to note

If you are aged 16 or above, we will process your 'right to object' form by carrying out our normal checks on the details you have given us.

From the age of 13 to 16, we will consider your right to object if your form has been signed on your behalf by someone with parental responsibility.

If it has not, we will ask a recognised health or care professional if they consider you to be competent to make such a decision.

If you are under the age of 13, we will only consider your right to object if your form has been signed on your behalf by someone with parental responsibility.

If you want to change your mind

You can reverse your decision to object at any time. Just complete the 'reversal of objection' form at https://www.happyhealthylives.uk/integrated-care-record/right-to-object-form/ and follow the instructions for emailing or posting it back to us.

Want to know more?

For more information about the Integrated Care Record and what it means for you, visit https://www.happyhealthylives.uk/integrated-care-record/.

Important information for anyone thinking of objecting

Objecting could have implications you hadn't thought about. Please take a minute to read this before making your decision.

If you object, each local health and social care organisation will only see records held about you on its own system. Anything needed from other services as part of your direct care or treatment will be forwarded through traditional methods such as phone, email or letter – as it is now.

This could mean vital information about you is not immediately available when you need health or social care support – for instance, during a visit to a hospital Emergency Department.

What will objecting really mean?

- In the Emergency Department, information urgently needed by doctors to treat you could be delayed or difficult to get in time to support your care.
- Your GP might not be able to see information from other organisations that's important for your care.
- With COVID-19 potentially set to be with us for the long term, treatment you might need for this could be affected in the same way.
- Your hospital treatment could involve an overnight stay if your GP practice can't forward your information quickly, for instance, when they're closed.
- You'll find yourself having to repeat information every time you need care, and maybe even tests you've already had.
- If you can't remember what medication you're taking you might be given some that reacts with it because your records aren't available quickly to check.
- The help you need from your social worker might take longer as they spend time chasing other professionals for important information.
- Your health and social care could feel disjointed as the professionals supporting you won't be able to see the care each is providing.

If you have questions

If you want to object, you can do so at any time – it's entirely your decision. But if you still have questions about it, and what it might mean for you, please speak to the health or care professional who normally provides your care.

Right to Object Request Form

Please complete in BLOCK CAPITALS and BLACK INK. If you're doing this on behalf of another adult, or you're signing on behalf of someone under 16 for whom

you have parental responsibility, put their details in Section A and your own in Section B.

Where to send this form

Email the form to collaborative.care.record@nhs.net, or post it to: Freepost COLLABORATIVE CARE RECORD. Please note, you do not need to add a stamp to your envelope.

Section A: Complete for the person who wants to object – either yourself or someone else

| Title: | Last name: | | | |
|----------------|------------|--------|--|--|
| Forename(s): | | | | |
| Address: | | | | |
| | | | | |
| Postcode: | | Email: | | |
| Date of birth: | | | | |
| NHS number (i | f known): | | | |

Section B: Only to be completed if you are a representative acting on behalf of a person who wants to object, or are signing on behalf of someone under 16 for whom you have parental responsibility

Your name:

Relationship to person who wants to object:

- I confirm: I have authority to act for the person who wants to object/I have parental responsibility for the person who wants to object.
- I understand there may be circumstances that mean further checks are needed to ensure correct information is provided when someone is acting for another, or signing on behalf of someone for whom they have parental responsibility.

Declaration

By signing below, I confirm I am asking that my records/the records of the person for whom I have parental responsibility are not made available to view through the Birmingham and Solihull Shared Care Record and I consider I have the authority to make such a request/sign on their behalf. I understand the information provided will be used to process the request. I acknowledge it is an offence to complete this request and falsely represent myself as the person detailed in section A or B.

| request and laisely represent myself as the person detailed | in scouding of D. |
|---|-------------------|
| Full printed name: | Date: |
| Signature | |
| | |

Office use only

| Date received | |
|-------------------------------------|--|
| Date identity checked and confirmed | |
| Date response sent | |