

Request for my information to be reinstated into the Camden Integrated Digital Record (CIDR)

# CIDR Opt-In Form

(Record Reinstatement)

The attached form has been developed to support your individual wishes in regards to the overall CIDR Program and the use of your information. Prior to signing this document please ensure that you have read all the information.

## What is an integrated digital record?

The CIDR system currently includes health and social care data from these different sources that provide services within Camden:

- Camden GPs
- University College London Hospitals (UCLH)
- Royal Free Hospital NHS Foundation Trust (RFH)
- Central and North West London NHS Foundation Trust (CNWL)
- Camden and Islington Foundation Trust (C&I)
- Coordinate My Care (CMC) (part of the Royal Marsden NHS Foundation Trust)
- London Borough of Camden (LBC)

## What are the benefits of having an integrated digital record?

There are a number of benefits to linking up health and social care information into an integrated digital record. These include:

- Health and social care professionals being able to access the information required to provide optimal care for you.
- Potential safety benefits, as health and social care professionals will be more aware of important information such as what prescription medications you are taking etc.
- You may not have to repeat information about yourself to multiple different care professionals, improving your care experience.

The data held in CIDR will **NEVER** be shared with 3rd party organisations and social care information (e.g. housing or social benefits) will not form part of your CIDR record unless you previously given explicit consent to Social Services.

For further information please visit: [cidrportal.camdenccg.nhs.uk](http://cidrportal.camdenccg.nhs.uk)

If you would like to have your CIDR record reinstated, please fill out the details overleaf and hand it into the reception who will action your request.

Please complete **ALL** sections in Part A and Part B.

## Part A: Personal Details

Please complete in BLOCK CAPITALS for the relevant Service User / Patient.

Title:

NHS Number:

Forename:

Surname:

Address:

Postcode:

Date of Birth:

## Part B: Opt In (Record Reinstated) to CIDR

(Please tick)

**I wish to have my CIDR record reinstated.**

I confirm that I understand the impact of this request.

Signed:

Date:

**PLEASE HAND BACK TO THE RECEPTIONIST ON COMPLETION**