

Attachment to informed consent:

“I have been informed of the purpose of the grant scheme.”

In order to achieve settlement of persons with severe functional impairments more quickly, municipalities may apply to IMDi (Directorate of Integration and Diversity) for a grant to cover some of their additional expenses for the first 5 years following your settlement. The funds they would receive are earmarked, which means they can only be used to pay for assistance for you specifically.

When the municipality is submitting an application, they have to include a certificate from a health institution outlining your severe functional impairment pre-dating your settlement. This certificate must describe your daily assistance needs, which necessitate the various measures the municipality is seeking grants to cover.

Information about you and your health will be stored until the 5-year application period expired, and then the information will be deleted. The information is stored in a secure system, which means that nobody outside IMDi will have access to it.

If IMDi rejects the application, this means it will not be processed. In such cases, the municipality can appeal to IMDi, which will then forward the matter to the Ministry of Labour and Social Inclusion.



Informed Consent

Attachment to application for additional grants in connection with settlement of refugees with severe functional impairments, as well as persons with severe behavioural or addiction problems

I consent to confidential health information about [name of the person whose information it is] (person concerned) can be disclosed to the Directorate of Immigration and Diversity (IMDi) by the enterprises and health personnel listed below, provided this information is necessary for the Municipality of [municipality name] to receive earmarked grants for settlement from IMDi. I also consent to the health information being disclosed to the appellate body if IMDi's decision is appealed.

Enterprises/health personnel	Name of signatory	Date

I have been informed about the purpose of the grant scheme for settlement of persons with severe functional impairment and/or severe behavioural problems. I have also been informed that only information that is relevant and necessary for the purpose will be shared with IMDi and the appellate body. I am aware that the municipality cannot disclose this information to IMDi and the appellate body without my consent, and that I can withdraw my consent at any time. I am also aware that the rights I have/the person concerned has vis-à-vis the municipality remain even if I do not give consent, and that these rights do not change if I later withdraw my consent.

The consent is limited to a period of five years from the date of the first settlement. Consent must be renewed if information in the application needs updating during the five-year period.

My role:

- I am over the age of 16 and will therefore personally sign below
- The person concerned is under the age of 16 and I will sign below as a parent
- The person concerned is under the age of 16 and I will sign below as a publicly appointed carer
- The person concerned is over the age of 16, but incapable of giving consent, and I will sign as the person's next of kin
- The person concerned is between age 12 and age 16, and has consented to the medical assistance described in the health information. I will sign below in my role as health personnel to certify that I, in dialogue with the person concerned, have decided consent can be given.

DUF no. of the person concerned:	
Signature by/on behalf of the person concerned:	
Place, date:	

Name and role of the person who obtained consent:	
Signature of the person who obtained consent:	
Place, date:	