Managing the Clinical Records of Children Available for Adoption

Health Services Information Agency

1. Purpose
This Guideline provides recommendations regarding best practice for clinical recordkeeping requirements, including identifying information, for children of birth parents who are considering the placement of their child for adoption and the right of the child to be known by their birth name until the adoption process is finalised.

2. Scope
This Guideline provides information for all Department of Health employees (permanent, temporary and casual) and all organisations and individuals acting as its agents (including partners, contractors, consultants and volunteers).

This guideline applies to clinical records held by Queensland Health facilities for children whose parents have commenced an adoption order process under the Adoption Act 2009.

3. Related documents
Authorising Policy and Standard/s:
- Managing the Clinical Records of Children Available for Adoption Policy

Procedures, Guidelines and Protocols:
- Managing the Clinical Records of Children Available for Adoption Implementation Standard
- Client Identification Data Set Specification (CI DSS)

4. Guideline for Managing the Clinical Records of Children Available for Adoption

4.1 Child for Adoption
- A child for adoption will remain with his or her birth name until the child is placed with adoptive parents under an interim or final order. The clinical record of the child for adoption cannot be established and maintained as unnamed, de-identified or in the name of the foster carer. Full and accurate records are to be made, managed and preserved for as long as they are required for business, legislative, accountability and cultural purposes.
The child for adoption is to be registered in the same way that other children are registered under his or her birth name and the clinical record will be managed the same as any other client for whom a hospital accepts responsibility for treatment and/or care. Refer to the Client Identification Data Set Specification (CI DSS).

If the child is a newborn for adoption they should be identified by using the birth mother’s family name as the baby’s family name unless instructed otherwise by the birth mother. The baby’s given name should be registered as the name identified by the birth parents. If no name has been decided, use Baby of xxx (xxx is the birth mother’s given name). Using this process, a newborn baby that is for adoption is being registered in the same way that other newborn babies are registered. This birth name appears in the clinical record and is used to identify the child until the adoption process is finalised.

Birth parents who are considering the placement of their child for adoption are to provide as much information as possible about their medical history at the time they consent to their child’s adoption. This information is kept by Adoption Services Queensland, Department of Communities, Child Safety and Disability Services, and non-identifying clinical information is provided to adoptive parents at the time they adopt the child and can be provided when requested by adopted adults (18 years of age) at a later time.

When a child is identified as potentially being placed for adoption, Adoption Services Queensland are to be sent a copy of the Hospital and Health Service clinical record held under the child’s birth name upon their discharge from hospital (postal delivery address for Adoption Services Queensland, G.P.O. Box 806, Brisbane Qld 4001).

Upon finalisation of an adoption, Adoption Services Queensland will manage any future information release of the adopted child’s information that is held in the child’s birth name in accordance with Queensland’s Adoption Act 2009.

When a child is placed with adoptive parents subject to an interim or final adoption order, the child will take the name of their adoptive parents unless the Children’s Court orders that the child retains his or her birth name after adoption. Refer to section 5.5 of the Managing the Clinical Records of Children Available for Adoption Implementation Standard.

If the birth parents decide not to proceed with adoption, then responsibility for the access and information release of the child’s information will remain with the Hospital and Health Service.

The retention and disposal of all clinical records is managed under Health Sector Clinical Record Retention and Disposal Schedule. Except for clinical records that qualify as one of the noted exceptions, the adopted child’s birth records or whose parents were considering adoption are addressed in 1.2 Clinical Records – Minor and 3.2 Birth Registers.

4.2 Foster Child Clinical Record

During the transitional period when the child is in foster care, the best possible record management practices will need to be maintained to ensure policy and social responsibilities are met. Maintaining the clinical record in the child’s birth
It is not appropriate for birth parents to continue to receive correspondence from the Hospital and Health Services in regard to the ongoing treatment and/or care of their child if the child is in the temporary care of a foster carer. This may be upsetting for the birth parents and also breaches the child’s right to privacy in accordance with the Information Privacy Act 2009 whereby Hospital and Health Services must ensure, by the adoption of appropriate procedures, that any information intended for the child is received only by the child’s foster carer or the person who is granted guardianship of the child under the Child Protection Act 1999 or who otherwise exercises parental responsibility for the child under a decision or order of the Children’s Court.

The child will be known by their birth name while they are in foster care and any admission or care given during this time will be under their birth name.

Adoption Services Queensland or the foster carer will advise the relevant Hospital and Health Service and/or facility with regard to the correct postal delivery address details for correspondence from Hospital and Health Services during the transitional period. This would usually be either the foster carer or Adoption Services Queensland. If this is a written communication it should be filed in the correspondence section of the clinical record. Prompt updating of the information system is very important to ensure the correspondence is correctly addressed.

At any time before the adoption, the child’s birth parents will remain the legal guardians of the child until an interim order or final adoption order has been made. Therefore they have the same right to access their child’s clinical record and request information from the child’s record for this time period, through the appropriate channel and release mechanism, as any other parents. However, the correspondence and any other information that may identify the foster carer should not be included in the clinical record information released to the birth parents. Refer to the Right to Information Act 2009 and Information Privacy Act 2009 for detailed information.

### 4.3 Adopted Child Clinical Record

When the adoption order is finalised, the adopted child will take the name of their adoptive parents (the legal guardians of the child) unless the Children’s Court orders that the child retains his or her birth name after adoption. This might occur where a child is adopted by his or her foster family as a teenager and wishes to retain his or her birth name. If the child is subsequently admitted to the same or any other hospital for treatment and/or care, the child is to be registered under their adopted name with a new Unit Record Number or Medical Record Number. A new clinical record is created under the adopted child’s name as per any new registration and admission. The adopted child’s clinical record is not linked to any information that is held in the pre-adoption
clinical record. Where a child retains their birth name, once adopted, the record created prior to adoption will become inactive and not be linked to the new record.

- The Hospital and Health Services play no role in providing information to people affected by adoption after an adoption order has been finalised. The Hospital and Health Service provides a copy of the child’s clinical record held under the child’s birth name on their discharge from hospital to Adoption Services Queensland. Adoption Services Queensland will manage any future information release of the adopted child’s information that is held in the child’s birth name, in accordance with the requirements of Part 4A of the Adoption Act 2009.

- For clinical recordkeeping the Hospital and Health Service does not need to document that the child is an adopted child. The clinical record is to be managed as any other clinical record, including any future access and information release of the adopted child’s information. The adopted child’s clinical record is not linked to any information that is held in the birth name of that child. If clinical information is required, it may be provided at the discretion of the Adoption Services Queensland. Adoption Services Queensland will provide the appropriate non-identifying clinical information to approved requestor/s, e.g. adoptive parents, at the time they adopt children and adopted adults (18 years of age) at a later time. The Adoption Act 2009 also enables identifying information to be released, but only with the written consent of the birth parents, e.g. birth parent’s last known name and address.

5. **Review**

This Guideline is due for review on: 15/12/2013

**Date of Last Review:** 28/02/2011

**Supersedes:** N/A

6. **Business Area Contact**

Clinical Information Management, Planning Engagement and Performance Directorate, Health Services Information Agency

7. **Definitions of terms used in the policy and supporting documents**

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition / Explanation / Details</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adoption order</td>
<td>A final adoption order or interim order.</td>
<td>Adoption Act 2009</td>
</tr>
<tr>
<td>Adoptive parent</td>
<td>A person who has adopted someone else under the relevant adoption laws. A person who has adopted someone else under a final adoption order.</td>
<td>Adoption Act 2009</td>
</tr>
<tr>
<td>Approved foster carer</td>
<td>A person who holds a certificate of approval as an approved foster carer.</td>
<td>Child Protection Act 1999</td>
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<tr>
<td>Birth Name</td>
<td>The name a child is given by his or her parents at birth.</td>
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<tr>
<td>Birth parent</td>
<td>A person who was a parent of the adopted person at</td>
<td>Adoption Act 2009</td>
</tr>
</tbody>
</table>
### Term | Definition / Explanation / Details | Source
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Child | A child is an individual under 18 years. | Child Protection Act 1999
Clinical record | A record that contains data or information relating to individual patients/clients (or groups of patients/clients) created as evidence of the delivery of a clinical service. | Department of Health definition
Final adoption order | A final adoption order under part 9. | Adoption Act 2009
Interim order | An interim order under part 9. | Adoption Act 2009
Parent | The child’s mother or father; and anyone else, other than the chief executive (child safety) or a corresponding officer of another jurisdiction, with the right to have the child’s daily care, and the right and responsibility to make decisions about the child’s daily care, under-
(i) a law of the State other than this Act; or
(ii) a law of the Commonwealth or another State; or
(iii) a court order other than an order under this Act. | Adoption Act 2009
Records | Recorded information created or received by an entity in the transaction of business or the conduct of affairs that provides evidence of the business or affairs and includes:

a) anything on which there is writing
b) anything on which there are marks, figures, symbols or perforations having a meaning for persons, including persons qualified to interpret them
c) anything from which sounds, images or writings can be reproduced with or without the aid of anything else, or
d) a map, plan, drawing or photograph. | Public Records Act 2002

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### 8. Approval and Implementation

**Policy Custodian:**
Executive Director, Planning Engagement and Performance Directorate, Health Services Information Agency

**Responsible Executive Team Member:**
Chief Information Officer, Health Services Information Agency

**Approving Officer:**
Ray Brown, Chief Information Officer, Health Services Information Agency

**Approval date:** 9 July 2013
**Effective from:** 1 July 2013