

Managing the clinical records of children available for adoption - Guideline

Department of Health Guideline

GH-GDL-280-1:2015

1. Statement

This guideline provides recommendations regarding best practice for clinical recordkeeping requirements, including identifying information, for children for whom adoption is being considered, and children who are adopted.

2. Scope

Compliance with this guideline is not mandatory, but sound reasoning must exist for departing from the recommended principles within a guideline.

This guideline applies to all employees, contractors and consultants within the Department of Health divisions and business units.

It applies to clinical records managed by the Hospital and Health Service (HHS) and/or individual health facilities regardless of the medium:

- Physical records (physical form such as paper, photographs, film)
- Electronic records (a record created or captured through electronic means such as computer, scanner or born digital materials). All information in digital formats should be maintained with necessary metadata to support the retrieval and access to the information
- Hybrid records (a combination of physical and electronic records)

This guideline does not include corporate records (administrative and non-clinical functions).

This guideline may be adopted by HHSs and re-branded as an HHS specific standard or used as a basis for a local HHS specific guideline.

3. Requirements

3.1. Establishing a clinical record for a child for adoption

3.1.1. A clinical record shall be established for all children, including those for whom adoption is being considered, using the child's

- Family Name/Surname
- Given name(s)
- Date of Birth
- Sex

- 3.1.2. The clinical record of a child for whom adoption is being considered shall not be unnamed, de-identified or in the name of the child's foster carer.¹
- 3.1.3. The clinical record of a child shall be established using the birth mother's family name/surname as the baby's family name/surname, unless instructed otherwise by the birth parents, regardless of whether the birth parents are considering adoption for their child. The baby's given name(s) should be recorded as identified by the birth registration certificate. If the baby's given name(s) has not been registered, use Baby of xxx (xxx is the mother's given name).²
- 3.1.4. The word 'adoption' must not be used as the family name/surname, given name(s), or alias for a newborn baby.³
- 3.1.5. The clinical record of a child for whom adoption is being considered shall remain in the child's birth name until the Childrens Court makes an interim or final adoption order in relation to the child.⁴
- 3.1.6. Birth parents who are considering the placement of their child for adoption are to provide as much information as possible about their medical history. This information is recorded in the child's clinical record and a copy kept by Adoption and Permanent Care Services, Department of Child Safety, Seniors and Disability Services. Non-identifying clinical information is provided to prospective 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.
- 3.1.7. When a child is identified as potentially being placed for adoption, Adoption and Permanent Care Services are to be sent a copy of the health facility's clinical record held under the child's birth name upon their discharge from the health facility to Adoption and Permanent Care Services, Locked Bag 3405, Brisbane Qld 4001.
- 3.1.8. The clinical record will be managed the same as for other children for whom a health facility accepts responsibility for treatment and/or care.⁵

¹ United Nations 1989, Convention on the Rights of the Children, viewed October 2023, [unicef-simplified-convention-child-rights.pdf](#)

² Department of Health 2023, Person and Provider Identification Data Set-Definitions, viewed October 2023, https://qheps.health.qld.gov.au/_data/assets/pdf_file/0025/2160970/Person-and-Provider-Identification-DSD.pdf

³ Queensland Health Information Knowledgebase, viewed October 2023, [Elements Detail \(health.qld.gov.au\)](#)

⁴ Adoption Act 2009 (Qld), viewed October 2023, <https://legislation.qld.gov.au/view/html/inforce/current/act-2009-029>

⁵ Department of Health, Clinical Records Management Policy QH-POL-280:2014, viewed October 2023, https://www.health.qld.gov.au/_data/assets/pdf_file/0032/395825/qh-pol-280.pdf

3.1.9. Complete and accurate records are to be made, managed, and preserved for as long as they are required for business, legislative, accountability and cultural purposes.

3.1.10. Clinical records are not to be managed through an electronic Document and Records Management System (eDRMS) or through Office 365 (including Microsoft SharePoint and Teams).⁶

3.2. Registration of the birth for a child for whom adoption is being considered

3.2.1. If the child being considered for adoption is a newborn, they should be identified by using the birth mother's family name/surname as the baby's family name/surname unless instructed otherwise by the birth mother.

The baby's given name(s) should be registered in the Patient Administration System (PAS) as the name(s) identified on the birth registration certificate. If no name has been decided, use Baby of xxx (xxx is the birth mother's given name).⁷

3.2.2. A newborn baby that is being considered for adoption is registered in the same way that other newborn babies are registered. The birth name appears in the clinical record and is used to identify the child until the adoption process is finalised.

3.3. Clinical records of children in foster care transitioning to adoption

3.3.1. 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 the child's birth name.

3.3.2. 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, procedures and social responsibilities are met. Maintaining the clinical record in the child's birth name supports the principles set forth in international instruments, in particular the United Nations Convention on the Rights of the Child (UNCROC), of 20 November 1989, and the United Nations Declaration on Social and Legal Principles relating to the Protection and Welfare of Children, with Special Reference

⁶ Ibid.

⁷ Department of Health, Person and Provider Identification Data Set-Definitions, viewed October 2023, https://qheps.health.qld.gov.au/_data/assets/pdf_file/0025/2160970/Person-and-Provider-Identification-DSD.pdf

to Foster Placement and Adoption Nationally and Internationally (General Assembly Resolution 41/85, of 3 December 1986).

- 3.3.3. It is not appropriate for birth parents to continue to receive correspondence from the health facility regarding the on-going treatment and/or care of their child if the child is in the temporary care of a foster carer. This breaches the child's right to privacy in accordance with the *Information Privacy Act 2009* (Qld). The health facility must ensure 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 *Adoption Act 2009* (Qld) or who otherwise exercises parental responsibility for the child under a decision or order of the Children's Court or under a Cultural Recognition Order.
- 3.3.4. When a child presents to a health facility, the PAS registration screen is to have the contact details of Adoption and Permanent Care Services. Adoption and Permanent Care Services will then advise the relevant health facility regarding the correct postal delivery address details for correspondence from the health facility during the transitional period. Communication with Adoption and Permanent Care Services should be filed in the correspondence section of the clinical record. Prompt updating of the PAS is important to ensure the correspondence is correctly addressed.

3.4. Adopted child clinical record

- 3.4.1. A new clinical record is to be created when the Childrens Court makes an interim or final adoption order in relation to the child when the child represents to the health facility.
- 3.4.2. If the child retains their birth name, a new clinical record is to be created under the child's name as per any new registration and admission when they are subsequently admitted to the same and/or any other health facility for treatment or care. A new Unit Record Number and new clinical record will be created. The child shall not be linked to the birth parent/s.
- 3.4.3. If the child has a new name, a new clinical record is to be created under the child's new name as per any new registration and admission when they are subsequently admitted to the same and/or any other health facility for treatment or care. A new Unit Record Number and new clinical record will be created. The child shall not be linked to the birth parent/s.
- 3.4.4. 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.
- 3.4.5. The health facility is not responsible for providing information to people involved in the adoption after an adoption order has been finalised. Upon discharge from hospital, the health facility provides a copy of the

child's clinical record held under the child's birth name to Adoption and Permanent Care Services. Adoption and Permanent Care Services 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 11 of the *Adoption Act 2009* (Qld).

- 3.4.6. For clinical recordkeeping, the health facility should not 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 Adoption and Permanent Care Services. Adoption and Permanent Care Services will provide the appropriate non-identifying clinical information to approved requestor/s, for example, the adoptive parents at the time of adoption or the adopted children who have reached 18 years of age.
- 3.4.7. The retention and disposal of all clinical records is managed in accordance with the [Health Sector \(Clinical Records\) Retention and Disposal Schedule](#) and [Retention and disposal of clinical records Standard QH-IMP-1:2014](#). Active disposal freezes must be complied with.

3.5. Release of information

- 3.5.1. At any time before the adoption, and until the birth parents sign their consent to the child's 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 through the appropriate channel and release mechanism, as any other parents.
- 3.5.2. Upon finalisation of an adoption, Adoption and Permanent Care Services will manage any future information release of the adopted child's information that is held in the child's birth name.⁸
- 3.5.3. Where the birth parents decide not to proceed with adoption, then the responsibility for the access and information release of the child's information will remain with the health facility.
- 3.5.4. The correspondence and any other information that may identify the child's carer should not be included in the clinical record information released to the birth parents.

⁸ *Adoption Act 2009* (Qld), viewed March 2023, <https://www.legislation.qld.gov.au/view/html/inforce/current/act-2009-029>

3.5.5. Prescribed bodies may share relevant information on request from other prescribed bodies, for purposes related to preventing, identifying, and responding to child sexual abuse in institutional contexts, subject to limited exceptions.⁹

3.6. Access to clinical record

3.6.1. Health facility staff shall only access the clinical record if the access is required, permitted or authorised by a decision-maker in the genuine belief that the access was required or permitted to be given under the *Information Privacy Act 2009* (Qld).

4. Aboriginal and Torres Strait Islander considerations

- Adoption is not part of Aboriginal tradition or Island custom. Adoption of an Aboriginal or Torres Strait Islander child should be considered as a way of meeting the child's need for long-term stable care only if there is no better available option.¹⁰ The Queensland [Aboriginal and Torres Strait Islander Child Placement Principle](#) recognises the importance of connections to family, community, culture and country in the child and family welfare legislation, policy and practice.
- A legally recognised cultural parent of a Torres Strait Islander child through a [Cultural Recognition Order](#) enables the permanent transfer of parentage from the birth parent to the cultural parent. A Cultural Recognition Order allows a cultural parent to make legal decisions about their child's health.¹¹
- The Aboriginal or Torres Strait Islander status of the child must be confirmed, as the status may differ from the mother for the registration of the birth of the child for whom adoption is being considered.

5. Legislation

- [Adoption Act 2009 \(Qld\)](#)
- [Adoption and Other Legislation Amendment Bill 2016 \(Qld\)](#)

⁹ Royal Commission into Institutional Responses to Child Sexual Abuse 2017, viewed October 2023, https://www.childabuseroyalcommission.gov.au/sites/default/files/final_report_-_recommendations.pdf

¹⁰ Queensland Government, *Meriba Omasker Kaziw Kazipa (Torres Strait Islander Traditional Child Rearing Practice) Act 2020*, viewed October 2023, <https://www.legislation.qld.gov.au/view/html/asmade/act-2020-033>

¹¹ Ibid.

- [Births, Deaths and Marriages Registration Act 2003 \(Qld\)](#)
- [Coroners Act 2003 \(Qld\)](#)
- [Electronic Transactions \(Queensland\) Act 2001](#)
- [Hospital and Health Boards Act 2011 \(Qld\)](#)
- [Human Rights Act 2019 \(Qld\)](#)
- [Information Privacy Act 2009 \(Qld\)](#)
- [Judicial Review Act 1991 \(Qld\)](#)
- [Mater Public Health Services Act 2008 \(Qld\)](#)
- [Mental Health Act 2016 \(Qld\)](#)
- [Meriba Omasker Kaziw Kazipa \(Torres Strait Islander Traditional Child Rearing Practice\) Act 2020 \(Qld\)](#)
- [Public Health Act 2005 \(Qld\)](#)
- [Public Records Act 2002 \(Qld\)](#)
- [Public Sector Act 2022 \(Qld\)](#)
- [Right to Information Act 2009 \(Qld\)](#)
- [Working with Children \(Risk Management and Screening\) Act 2000 \(Qld\)](#)

6. Supporting documents

Australian Standards

- Australian Standard 2828.1-2019 Health Records – Part 1: Paper health records
- Australian Standard 2828.2-2019 Health Records – Part 2: Digitized health records

Department of Child Safety, Seniors and Disability Services

- [Aboriginal and Torres Strait Islander Child Placement Principle](#)

Federal Government

- [Royal commission into institutional responses to child sexual abuse](#)

Queensland Government Enterprise Architecture (QGEA)

- [Information access and use policy \(IS33\)](#)
- [Information security assurance and classification guideline](#)
- [Information security classification framework \(QGISCF\)](#)
- [Information security policy \(IS18:2018\)](#)
- [Records governance policy](#)
- [Records governance policy implementation guideline](#)

Queensland Health

- [Assignment of unique Unit Record Number standard \(QH-IMP-3:2014\)](#)
- [Clinical documentation guideline](#)
- [Clinical records management policy \(QH-IMP-280:2014\)](#)

- [Code of Conduct for the Queensland Public Service](#)
- [Documentation of date and time entry in the paper-based clinical record standard \(QH-IMP-279-2:2013\)](#)
- [Managing the clinical records of children available for adoption standard \(QH-IMP-280-4:2014\)](#)
- [Management and access to documents and records Legal Branch fact sheet](#)
- [Retention and disposal of clinical records standard \(QH-IMP-280-1:2014\)](#)
- [Terminology Guide: for the use of First Nations and Aboriginal and Torres Strait Islander peoples references](#)

Queensland State Archives

- [Health Sector \(Clinical Records\) Retention and Disposal Schedule](#)

United Nations

- [United Nations Convention on the Rights of the Child \(UNCROC\), of 20 November 1989](#)
- [United Nations Declaration on Social and Legal Principles relating to the Protection and Welfare of Children, with Special Reference to Foster Placement and Adoption Nationally and Internationally \(General Assembly Resolution 41/85: General Family and Child Welfare - Article 8, 6 February 1987\)](#)

7. Definitions

| Term | Definition |
|---|---|
| Adoption order | A final adoption order or interim order. |
| Adoptive parent | A person who has adopted someone else under a final adoption order. |
| Approved foster carer | A person who holds a certificate of approval as an approved foster carer. |
| Birth name | The name a child is given by their parents at birth. |
| Birth parent | A person who was a parent of the adopted person at any time before the adoption, including- (i) a biological parent of the adopted person; and (ii) someone who was a parent of the adopted person under a previous adoption. |
| Carer | Means the entity in whose care the child has been placed under section 82(1) of the Child Protection Act 1999 (Qld). |
| Child | A child is an individual under 18 years of age. |
| Child for whom adoption is being considered | A child whose parents are considering consenting to their adoption whose consent has been dispensed with by the Children's Court or whose parent has consented to their adoption. |
| Clinical record (also referred to as a health record) | A collection of data and information gathered or generated to record clinical care and health status of an individual or group. Health records are made up of documents such as health record forms, clinical |

| Term | Definition |
|--|--|
| | documents, legally authenticated documents and clinical referral letters received from clinical providers. This term includes paper-based health records, clinical records, medical records, digitised health records, electronic health records, and healthcare records. |
| Cultural Parent | A person who, in accordance with Ailan Kastom child rearing practice, agrees to accept the permanent transfer of the parental rights and responsibility for a child from the child's birth parents to the person. |
| Electronic Document Records Management Systems (eDRMS) | An automated system designed to manage semi-structured or unstructured content including text, images, and video content. A subset of documents managed in an eDRMS can be declared to be records. The eDRMS manages these records using a rigorous set of business rules which are intended to preserve the context, authenticity and integrity of the records. |
| Electronic health record (EHR) | Health record with data structured and represented in a manner suited to computer calculations and presentation. Use of this term implies the ability to compute the content of the record. It is often described as presenting a lifetime record of health and care. It may include digitised information, as well as born digital records and other database entries. |
| Final adoption order | A final adoption order under part 9 of the <i>Adoption Act 2009</i> (Qld). |
| Hybrid Record | Health record comprising paper, digitized and electronic formats, created and accessed using both manual and electronic processes. A hybrid health record often arises as a transitional health record during migration from digitised format to a full EHR. |
| Interim order | An interim order under part 9 of the <i>Adoption Act 2009</i> (Qld). |
| 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- <ul style="list-style-type: none"> i) a law of the State other than the <i>Adoption Act 2009</i> (Qld); or ii) a law of the Commonwealth or another State; or iii) a court order other than an order under this <i>Adoption act 2009</i> (Qld). |
| Prescribed entity | Prescribed entities are the chief executives of government agencies responsible for adult corrective services, community services, disability services, education, housing services and Queensland Health, |

| Term | Definition |
|---------------|--|
| | the Queensland Police Service police commissioner, the chief executive officer of Mater Health Services, the principals of accredited Non-State Schools, specialist service providers, or the chief executive of another entity that provides a service to children and families and is prescribed by regulation |
| Recordkeeping | The act of making and maintaining of complete, accurate and reliable evidence of business transactions in the form of recorded information. |
| 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: <ul style="list-style-type: none"> 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. |

Version Control

| Version | Date | Comments |
|---------|-------------|---|
| 3.1 | 01 Jul 2013 | Approved. |
| 3.2 | 12 Jun 2015 | Transferred to new template and reviewed by Clinical Information Management. |
| 4.0 | 30 Jan 2024 | Guideline reviewed and updates made to Requirements section, Legislation, Supporting documents and Definitions. Section 4 newly added. Approved by the Information Management Strategic Governance Committee. |
| 4.0 | 5 Apr 2024 | Approved for publishing by Deputy Director-General, eHealth Queensland. |