

NEW YORK STATE
 DEPARTMENT OF SOCIAL SERVICES
 40 NORTH PEARL STREET, ALBANY, NEW YORK 12243



CESAR A. PERALES
 Commissioner

[An Administrative Directive is a written communication to local Social Services Districts providing directions to be followed in the administration of public assistance and care programs.]

ADMINISTRATIVE DIRECTIVE

TRANSMITTAL NO.: 84 ADM-40
 [Family & Children Services]

TO: Commissioners of Local Social Services
 Directors of Authorized Agencies

SUBJECT: Dissemination of Medical Histories to Prospective Adoptive Parents and Children Discharged from Foster Care to Their Own Responsibility
 DATE: November 7, 1984

SUGGESTED DISTRIBUTION: Directors of Social Services
 Adoption Staff
 Foster Care Staff

CONTACT PERSON: Any questions relating to the information contained in this release should be addressed to Renda Kimble, Division of Services, 40 North Pearl Street, Albany, New York 12243, telephone 1-800-342-3715, extension 3-8571.

I. PURPOSE

The purpose of this release is to advise local social services officials and authorized agency staff of the provisions of Chapter 326 of the Laws of 1983 and the recently promulgated regulations which implement this law. The law requires the release of medical histories of children legally freed for adoption or discharged from foster care into their own care.

II. BACKGROUND

Chapter 326 of the Laws of 1983 adds a new Section 373-a to the Social Services Law. This Chapter requires authorized agencies to provide medical histories of a child legally freed for adoption, and of his or her birth parents, with information identifying such birth parents eliminated, to the child's prospective adoptive parent(s). Also, when a child is being released from foster care into his or her own care, that child shall be provided with copies of his/her own medical history and those of the birth parents. Prior to the enactment of this law, there was no clear statutory authority for providing medical histories to prospective adoptive parents and children discharged from foster care into their own care.

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Social Services Law and Other Legal References	Bulletin/Chapter Reference	Miscellaneous Reference
		357.3(b) 421.18(k)	373-a		

III. PROGRAM IMPLICATIONS

Medical histories must now be provided by authorized agencies to the aforementioned persons, to the extent that the information is available. Information identifying birth parents must be eliminated prior to the release of such records to prospective adoptive parents. For purposes of the aforementioned regulations, medical histories in these regulations refer to all available information on conditions or diseases believed to be hereditary, drugs or medication taken during pregnancy by the child's birth mother and any other information which may be a factor influencing the child's past, present or future health.

There may be instances when a medical report or document is designated as being "Confidential". As is the case for all medical information concerning the birth parents which may subsequently be released to prospective adoptive parents or the children leaving foster care, good practice would dictate informing the birth parents that their medical histories may be shared with the aforementioned persons, and when practicable, attempting to secure their informed consent. However, not obtaining the birth parents informed consent does not relieve the agency from providing the medical histories to prospective adoptive parents or children leaving foster care into their own care. All information which is released to the prospective adoptive parents must delete identifying information concerning the birth parents.

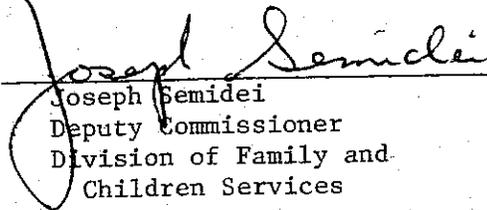
Although the precise point in time when medical histories should be shared with prospective adoptive parents is a decision to be made by the worker utilizing his or her professional judgment on a case by case basis, general parameters for when it is appropriate to do so cannot be prescribed. In that medical histories are confidential and personal, they should not be shared with all inquirers for a particular child. They should be shared when it is clear that the inquiring parents are seriously interested in such child and the worker believes that the prospective parent(s) have the potential to be a resource for that child. Notwithstanding the preceding caution about providing information too early, the histories need to be provided to prospective adoptive parents early enough so that they may be able to make an informed decision about whether they are capable and desirous of taking the next steps toward adopting the child.

IV. REQUIRED ACTION

Authorized agencies shall review their practices regarding the release of medical histories to prospective adoptive parents and children being discharged from foster care into their own care and, where necessary, bring their procedures into conformance with the provisions of Section 357.3(b) of the Department's Regulations.

V. EFFECTIVE DATE

This release is effective retroactively to the filing date of Section 357.3(b) of Department Regulations which was April 23, 1984.



Joseph Semidei
Deputy Commissioner
Division of Family and
Children Services

Filed 4/23/84

STATE DEPARTMENT OF SOCIAL SERVICES

ALBANY, NEW YORK

Pursuant to the provisions of Sections 20(3)(d), 34(3)(f) and 373-a of the Social Services Law, I, Cesar A. Perales, Commissioner of Social Services, do hereby amend subdivision (b) of Section 357.3 and add subdivision (k) to Section 424.18 of the Official Regulations of the State Department of Social Services, being Chapter II of Title 18 NYCRR, effective immediately upon filing with the Secretary of State.

Dated: APR 20 1984

Signed: Cesar A. Perales
Commissioner

This is to certify that this is the original of an order of the State Department of Social Services, made on amending subdivision (b) of Section 357.3 and adding subdivision (k) to Section 424.18 of the Official Regulations of the State Department of Social Services, being Title 18 NYCRR, the express terms of which were published in the New York State Register on DEC 28 1983

Dated:

Signed: Cesar A. Perales
Commissioner

Subdivision (b) of Section 357.3 is amended to read as follows:

(b) Disclosure of medical information.

1. The medical information supplied directly by a physician, dentist or nurse, as well as hospital or clinic reports shall be considered a confidential communication and shall be released to another agency only with the specific consent of the patient if competent.

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2. To the extent they are available, medical histories of a child legally freed for adoption and of his or her natural parents with information identifying such natural parents eliminated, shall be provided by an authorized agency to such child's prospective adoptive parent(s).

3. To the extent they are available, the medical histories of a child in foster care and of his or her natural parents shall be provided by an authorized agency to such child when discharged to his or her own care.

4. For the purposes of paragraph two and three of this subdivision, medical histories shall include all available information setting forth conditions or diseases believed to be hereditary, any drugs or medication taken during pregnancy by the child's natural mother and any other information which may be a factor influencing the child's past, present or future health.

Subdivision (k) is added to section 421.18 to read as follows:

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(k) authorized agencies shall, to the extent available, provide to prospective adoptive parent(s) the medical histories, as described in section 373-a of the social services law, of a child legally freed for adoption as well as that of his or her natural parents. Information identifying natural parents shall be eliminated from such medical histories.

(Deleted material [brackets] ; new material underlined)