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| LOCAL COMMISSIONERS MEMORANDUM |
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Transmittal No: 90 LCM-110

Date: July 24, 1990

Division: Family and Children
Services

TO: Local District Commissioners

SUBJECT: Tracking of Foster Children with HIV-Positive Diagnosis

ATTACHMENTS: Contact Person Form - (available on-line)

This is to inform you of an upcoming revision in the reporting procedures for children in foster care who have been diagnosed as having AIDS/HIV related illness, or who test positive for HIV antibodies. My letter of August 13, 1987 established the current reporting mechanism for children with AIDS or an HIV positive antibody test. A forthcoming letter will revise this procedure. These revisions will enable us to standardize the statewide reporting on these children in order to better address current service needs and ensure effective program planning and implementation.

We anticipate the final stage of the implementation of this standardized central reporting and tracking mechanism during August of this year. In preparation, we are asking you to appoint a contact person within your agency to coordinate the implementation and data compilation activities. Please send by July 30, the name, title, address, and telephone number of your contact person to:

Carol Shortsleeves
Bureau of Central Operations
Division of Family & Children Services
NYS Department of Social Services
40 N. Pearl Street - 11D
Albany, NY 12243

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Thank you for your cooperation. Please do not hesitate to contact Ms. Shortsleeves at 518-474-9594 if you have any questions or concerns regarding this matter.

Joseph Semidei
Deputy Commissioner
Family and Children Services

FOR YOUR CONVENIENCE, PLEASE USE THIS FORM.

TO: CAROL SHORTSLEEVES

RE: AIDS TRACKING PROCEDURES

NAME OF CONTACT PERSON: _____

TITLE _____

TELEPHONE: _____

AGENCY: _____

ADDRESS: _____
