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| Team Name: Health Information Services<br>Team Lead: Regional Manager Health Information Services<br>Approved by: VP - Corporate Services | Reference Number: ORG.1410.PL.004<br>Program Area: Health Information Services<br>Policy Section: Health Information |
| Issue Date: January 23, 2017<br>Review Date:<br>Revision Date:  | Subject: Health Records of Adopted Children  |

**POLICY SUBJECT:**

Health Records of Adopted Children

**PURPOSE:**

1. To protect the privacy rights of adopted children, adoptive parents and birth parents in those cases where adoption records are sealed.
2. To promote continuity of medical care for adopted children by provision of health records created under their birth name.
3. To comply with the Manitoba *Child and Family Services Act*.

**BOARD POLICY REFERENCE:**

Executive Limitation (EL-2) Treatment of Clients

**POLICY:**

1. Notification of an adoption or placement for adoption must be made to Health Information Services (Health Records). Notification may be by a letter from the respective Child and Family Services Agency designate or by production (showing) of the Order of Adoption to Health Information Services personnel.

**Note: Reproduction of the Order of Adoption is contrary to legislation.**

2. Upon notification of an adoption or adoption placement, all health records and corresponding material will be de-identified, leaving the originally issued health record number intact. The de-identified health record will be placed in circulation.
3. De-identification refers to the deletion of the child's birth name and demographic data contained in the health record, other records and related material so that no cross-reference can be made to link the birth name with the adoptive name.
4. Health Information Services personnel will be responsible for notifying other Southern Health-Santé Sud facilities, clinics, programs, and services as well as external agents in receipt of documentation from the applicable health record of the name change further to an adoption.
5. The following are responsible for completing the de-identification process in a manner that ensures that cross-referencing of names cannot occur:

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| a. | Electronic or manual Central Patient Index (CPI)             | Health Information Services Manager or designate of the appropriate facility, clinic, program or service. |
| b. | Health Record  | Health Information Services personnel of the appropriate facility, clinic, program or service.            |
| c. | Other records and related material (x-rays, private records) | Notified facility, clinic, program, service or external agent.  |
6. The original health record documents, containing the birth name and data, will be retained for a minimum two year period in a locked cabinet in the Health Information Services department and then be confidentially destroyed.
  7. All documents pertaining to the adoption and notification thereof will be retained in a locked cabinet in the Health Information Services department.
  8. In the event that an adoption placement disrupts before finalization of the adoption, the de-identified health record will be confidentially destroyed, and the original health record along with any new documentation updated to reflect the birth name will be placed back in circulation. Notification of same will be provided to those mentioned/involved under Section # 5 a-c.

**PROCEDURE:**

- 1.0 Health Information Services personnel shall:
  - 1.1 Receive notification of the adoption from the appropriate Child and Family Services (CFS) Agency designate or from the adoptive parents. The CFS letter shall be retained permanently. The Order of Adoption may only be shown by the adoptive parent and the information collected, no copies will be made.
  - 1.2 Secure the appropriate health record.
  - 1.3 Photocopy the appropriate health record.
  - 1.4 On the photocopied health record, delete any reference to the birth name, birth parents, foster parents, address, MB Health and PHIN numbers including the health record number and identification demographics of the birth mother.
  - 1.5 Identify the photocopied Summary Sheet with the new name, address, next-of-kin and the MB Health and PHIN numbers.
  - 1.6 Re-photocopy the de-identified photocopied health record.
  - 1.7 Ensure that the client's new name and new health record number are identified on all pages of the re-photocopied health record.
  - 1.8 Retain the original health record documents for a minimum two-year period.
  - 1.9 Delete any reference in electronic or manual Central Patient Index as appropriate.

- 1.10 Peruse the health record to determine involvement of Southern Health-Santé Sud facilities, clinics, programs, services and outside agencies in the care of the child. These include but are not limited to Diagnostic Services (radiology, laboratory, CT scan, ultrasound), Public Health, Mental Health, Pharmacy, Rehabilitation Services, Cadham Lab, Westman Canadian Blood Services, etc.
  - 1.11 Forward a letter of notification to the respective facilities, clinics, programs or services requesting name/demographic changes to existing documentation or materials be updated.
  - 1.12 Ensure that notification and correspondence regarding the adoption are secured in a locked cabinet.
  - 1.13 Ensure the original health record documents are confidentially destroyed once the retention period is complete.
  - 1.14 Under the existing health record number, update all information pertaining to the adoptive name, next-of-kin, MB Health and PHIN numbers, address and telephone number.
- 2.0 The Notified Departments shall:
- 2.1 Upon receipt of notification of a name change further to an adoption to proceed to update materials/records to the adoptive name and demographics according to their respective procedures.

**REFERENCES:**

*St. Boniface General Hospital, Health Records of Adopted Children Policy*  
*Health Sciences Centre, Medical Records of Adopted Children Policy*