



<i>Adoption Act</i>	Program	Post-Adoption Services	
	Subject	Disclosure of Non-Identifying Information	Policy # 6.02
Effective Date: November 28, 2000		Authorized by:	
Revised Date: January 31, 2021		Deputy Minister David Keedwell	

1.0 PURPOSE

The purpose of disclosing non-identifying information is to provide birth parents, adult adoptees and/or adoptive parents with specific information (which will not identify another person that they may be seeking). This policy outlines the procedures for completing and disclosing non-identifying background information to eligible applicants.

2.0 DEFINITIONS

- 2.1 **Post-Adoption Services:** an adoption disclosure service for those persons impacted by an adoption once the adopted person reaches the age of 18 years old.
- 2.2 **Non-Identifying Information:** information that does not or is not likely to identify a person.
- 2.3 **Service Request Directory:** a directory where all applications submitted to Post-Adoption Services are documented. The Service Request Directory includes the date of application, birth and/or current name of the applicant, the party type (e.g. birth parent, adult adoptee), and the service(s) requested.

3.0 POLICY STATEMENT

- 3.1 Post-Adoption Services must provide non-identifying information to the parties of an adoption according to the requirements of the *Adoption Act* (sections 48 to 53).
- 3.2 Post-Adoption Services only provides service to individuals whose adoption was finalized in the province of Prince Edward Island. Any inquiry for Post-Adoption Services where the adoption was not finalized in Prince Edward Island must be redirected by the applicant to the location where the adoption was finalized.

4.0 PROCEDURE STATEMENT

- 4.1 Non-identifying information for adoptions finalized in Prince Edward Island can be provided by request from the following applicants:
- an adult adopted person;
 - a birth parent; or
 - an adoptive parent.

4.2 Applicants can request this non-identifying information by completing the Post Adoption Services Application Form, attached. Upon receiving an application, Post Adoption Services records and processes it in the Service Request Directory. Service requests are completed in sequence from the date on which they are received.

4.3 The following guidelines must be followed by Post-Adoption Services staff when releasing requested non-identifying information to an applicant:

- The information is provided to applicants through the Non-Identifying Background Information format (attached);
- This information varies, depending on if it is the adult adopted person, the birth parent, or the adoptive parent who has requested it;
- The Non-Identifying Background Information format must be prepared with sensitivity to the perspective of the applicant who will receive it;
- The disclosure of any non-identifying information must not readily lead to the establishment of the identities of other parties of the adoption;
- The applicant must be told from where the information has been gathered. At this time, a further discussion with the applicant regarding the societal values, available services to pregnant mothers, and adoption practices at the time of the adoption may be needed;
- If Post-Adoption Services is aware that the birth parents had other children that were also adopted prior to the birth of the adult adopted person, the adult adopted person must be provided with this information. The adult adopted person can then decide if they would like to apply for an Active Search (see “Active Searches” policy). Any information about siblings born after the adult adopted person is not contained in that applicant’s adoption record, and therefore cannot be disclosed.

4.4 When preparing the written Non-Identifying Information for adopted persons and/or adoptive parents, the following information about the adult adopted person’s biological background leading up to the point of the adult adopted person’s placement, if known, will be included:

- significant dates in the adopted person’s life (e.g., important moves and legal events);
- birth history and early development (as recorded in the file). This can include, but is not limited to: birth weight, length, time of birth, hospital, labor and delivery, weights and heights at medicals, significant developmental milestones, and other pertinent information contained within the adoption record;
- birth family history (e.g., approximate ages at time of birth, home province and country, marital status, ethnic/racial origins, religion, physical descriptions, personality, occupation, education, hobbies and talents). This information can be provided for the birth mother, the birth father (if the paternity is confirmed or appears certain from the record), and birth siblings who were born at the time of the adoption; and

- circumstances of the adoption (e.g., how and why a plan of adoption was made for the child, who knew about the pregnancy, the birth parents' relationship before and after placement, and court dates).
- 4.5 When preparing the written Non-Identifying Background Information for a birth parent, the following information about the adopted person leading up to the point of the adopted person's placement, if known, will be included:
- birth history and early development (as recorded in the file). This can include, but is not limited to: birth weight, length, time of birth, hospital, labor and delivery, weights and heights at medicals, significant developmental milestones, and other pertinent information contained within the adoption record; and
 - significant dates in the adopted person's life (e.g., important moves and life events).
- 4.6 Non-identifying information about the adoptive family will not be released.
- 4.7 If there is difficulty locating birth and early development information in the adoption record, the Post-Adoption Services consultant may request any available information from Medical Records.
- 4.8 All Non-Identifying Background Information documents must be provided to the applicant by registered mail or in-person only. Electronic distribution is not permissible due to the sensitivity of the information in the adoption file.
- 4.9 Once requested service objectives are met, or a determination is made to close a file, a Closing Summary (attached) is to be completed and placed in the adoption file.
- 5.0 ATTACHMENTS**
- 5.1 Post-Adoption Services Application Form
- 5.2 Non-Identifying Background Information format
- 5.3 Closing Summary

HISTORY:

January 28, 2021: Updated to align with current practices relating to Post-Adoption Services (e.g. removing birth relatives and significant others as eligible applicants, the use of new forms such as the "Post-Adoption Services Application Form") and editorial changes.

November 28, 2000: Original policy drafted and approved ("Disclosure of Non-Identifying Information", # 41.13.02)



Post-Adoption Services Application Form

Please note: This form is valid as of January 31, 2021.

Office Use Only

Date Received:

Submission ID:

Processed By:

Post-Adoption Services provides services for people separated by adoptions to obtain information and/or potentially have contact with each other. Services include adoption information, Post-Adoption Register, and Active Search.

The information provided on this form is collected under the authority of the *Adoption Act*, and this information will be used to fulfill the requirements of this *Act*.

For questions:

Call: (902) 368-6139 or 1-844-982-0507 (toll free in North America)

Mail: Post-Adoption Services, P.O. 2000, 161 St. Peter's Road, Charlottetown, PE, C1A 7N8

Email: adoption@gov.pe.ca

All sections marked with an * must be completed; however, you are encouraged to complete all sections to the best of your knowledge and ability.

Applicant Information

All applicants must complete this section.

First Name *		Middle Name(s) *		Current Surname *	
Previous Names (i.e. Maiden Name)			Date of Birth (DD/MM/YYYY) *		
Mailing Address: Apartment Number/ Street Name and Number *					
City/Town *	Province/ State*	Country*		Postal/ZIP Code*	
Main Telephone Number * (include area code)			Additional Telephone Number(s) (include area code)		
Main E-mail Address *			Confirm E-mail Address*		

Birth and Adoption Information

All applicants must complete this section.

Name On Birth Certificate After Adoption	Date of Birth (DD/MM/YYYY)
Birth name of Adoptee (if known)	Place of Birth
Adoptive Parent #1: Full Name and Date of Birth	Adoptive Parent #2: Full Name and Date of Birth
Birth Mother's Name (if known)	Birth Father's Name (if known)
Place of Adoption (City, Province/ State, Country)	

Requested Services

All applicants must complete this section.

Post-Adoption Services are available for adult adoptees, birth parent(s), immediate birth family members (i.e. aunts, uncles, grandparents, siblings), and adoptive parent(s).

Please complete the section that best describes you and the services you are requesting.

Adult Adoptee
Please check the service(s) you are requesting:
<input type="checkbox"/> Receive health history only (if available).
<input type="checkbox"/> <u>Non-Identifying</u> background information (e.g. health history), which may be contained in the adoption records.
<input type="checkbox"/> Specific <u>identifying</u> background information from the original birth registration and a copy of the Adoption Order.
<input type="checkbox"/> Place my name on the Post-Adoption Register for possible contact or exchange of information with birth family. This request does not ask for an active search, but instead it is a means to allow for adult adopted persons, birth parents, birth family and adoptive parents to identify their willingness to have potential contact with each other. If there is a match identified on the Post-Adoption Register, the parties may be notified for potential contact.
<input type="checkbox"/> Register for an Active Search for the purpose of contact with my: <ul style="list-style-type: none"> <input type="checkbox"/> Birth mother <input type="checkbox"/> Birth father (<i>this can only be done if the identity on the adoption record is certain</i>) <input type="checkbox"/> Birth sibling(s)

Birth Parent(s)

Please check the service(s) you are requesting:

- Non-identifying background information, if available, up to the time of my child's adoption (e.g. health history).
- Copy of the Adoption Order (which includes the adoptive name of the child).
- Place my name on the Post-Adoption Register for possible contact or information exchange between my adult adopted child and myself. This request does not ask for an active search, but instead it is a means to allow for adult adopted persons, birth parents, birth family and adoptive parents to identify their willingness to have potential contact with each other. If there is a match identified on the Post-Adoption Register, the parties may be notified for potential contact.
- Registration for an Active Search for the purpose of contact with my adult adopted child.

Child of Deceased Adult Adopted Person

Must include confirmation that the Adult Adopted Person is deceased (i.e. obituary, death notice)

- Specific identifying background information from the original birth registration and a copy of the Adoption Order.
- Place my name on the Post-Adoption Register for possible contact or information exchange with birth family. This request does not ask for an active search, but instead it is a means to allow for adult adopted persons, birth parents, birth family and adoptive parents to identify their willingness to have potential contact with each other. If there is a match identified on the Post-Adoption Register, the parties may be notified for potential contact.

Child of Deceased Birth Parent

Must include confirmation that the Birth Parent is deceased (i.e. obituary, death notice)

- Copy of the Adoption Order (which includes the adoptive name of the child).
- Place my name on the Post-Adoption Register for possible contact or information exchange with birth family. This request does not ask for an active search, but instead it is a means to allow for adult adopted persons, birth parents, birth family and adoptive parents to identify their willingness to have potential contact with each other. If there is a match identified on the Post-Adoption Register, the parties may be notified for potential contact.

Birth Family

Please check the service you are requesting:

- To have my name placed on the Post-Adoption Register for possible contact or information exchange with the adult adoptee.

Relationship to the adult adoptee (please specify): _____

Adoptive Parent

Please check the service(s) you are requesting:

- Non-identifying background information, if available, about my adopted child (e.g. health history).
- Place my name on the Post Adoption Register for possible contact or information exchange with the birth family. The following are circumstances in which this could occur: the adoptee is deceased; the adoptee is an adult but due to special challenges is not competent to make this decision; the adoptee is over 18 years of age and wishes the applicant to register on their behalf. *

**Please note that if this option is selected, the adoptee must sign and date below.*

Date (Day, Month, Year)

Signature of Adopted Person

Terms of Agreement

All applicants must read this section.

Please read the following information and terms below:

- I give Prince Edward Island Post-Adoption Services permission to confidentially discuss this request with anyone the service finds necessary, in order to assist in providing this service.
- If applicable, I consent to the release of identifying information about me if there is match on the Post-Adoption Register. I understand that Post-Adoption Services will contact me before releasing this information and that I may withdraw consent at any time, in writing.
- I understand that I am not able to request or access identifying information until January 31, 2021.
- I acknowledge that the information that I have included within this application is true, and has been completed to the best of my knowledge and ability.

Application Attachments

All applicants must complete this section.

In addition to completing this application form, please attach a clear copy of two current government-issued ID with your application (i.e. Driver's License, Passport, Birth Certificate, Health Card). If the copy is not clear, your application will not be processed and will be returned to you.

Signature

All applicants must complete this section.

By signing and dating below, I acknowledge that I have read and accept the Terms of Agreement as outlined above, and have included two current government-issued ID with my application.

Full Name (Printed)

Full Name (Signature)

Date (DD-MM-YYYY)

Submitting Application

Your completed application can be submitted by:

Mail

Post-Adoption Services
P.O Box 2000
161 St. Peter's Road
Charlottetown, PE, Canada

Email

adoption@gov.pe.ca

BACKGROUND INFORMATION

BIRTH HISTORY AND EARLY DEVELOPMENT:

BIRTH FAMILY HISTORY:

BIRTH MOTHER

BIRTH FATHER

BIRTH SIBLINGS

CIRCUMSTANCES OF THE ADOPTION:

Name of Worker,

Date

Post-Adoption Services Consultant

The preceding information has been provided under Sections 49 and 50 of the *Adoption Act* (1993) Prince Edward Island. It has been obtained from the records of the Prince Edward Island Director of Child Protection which were prepared at the time of the adoption.

This information is an accurate reflection of what was recorded and, through policy and practice, every effort has been made to ensure recording was accurate. However, due to the historical nature of the records, the accuracy of the information cannot be verified or guaranteed.

**POST-ADOPTION SERVICES
CLOSING SUMMARY NOTES**

APPLICANT:

BIRTH NAME:

BIRTH PARENT (S):

ADOPTIVE PARENT (S):

DATE OF APPLICATION:

DATE OF SERVICE OPENED:

SERVICE PROVIDED:

-

OUTCOME:

-

OUTSTANDING ISSUES:

DATE CLOSED:

Post-Adoption Services Worker