

**Office of Child Welfare Programs**

Lacey Andresen, Program Manager for Title IV-E  
Waiver

**Authorized signature**

**Number:** CW-IM-17-005

**Issue date:** 05/15/2017

**Topic:** Other

**Subject:** Records Requests by Child Welfare Clients

**Applies to (check all that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> All DHS employees                       | <input type="checkbox"/> County Mental Health Directors                         |
| <input type="checkbox"/> Area Agencies on Aging                  | <input type="checkbox"/> Health Services  |
| <input type="checkbox"/> Aging and People with Disabilities      | <input type="checkbox"/> Office of Developmental<br>Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs               | <input type="checkbox"/> ODDS Children’s Intensive<br>In Home Services          |
| <input type="checkbox"/> County DD Program Managers              | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                   |
| <input type="checkbox"/> ODDS Children’s<br>Residential Services | <input type="checkbox"/> Other <i>(please specify):</i>                         |
| <input checked="" type="checkbox"/> Child Welfare Programs       |   |

**Message:**

As an agency, we’ve been operating under the unwritten policy of not charging clients when they request copies of their own records or those of their child(ren). Our practice has drifted and varies across the State. Child Welfare Director Lena Alhusseini has reconfirmed that we should not be charging clients for copying, mailing, or translating these records. Please continue your practice of working with clients to clarify what records will meet their needs to keep our costs down, as many times the requests are very broad but can be streamlined. If you receive a request that is particularly onerous to comply with and would like to seek an exception to providing the records to the client free of charge, please contact Lee Lower.

*If you have any questions about this information, contact:*

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|--------------------|-----------------------|-------------|--|
| <b>Contact(s):</b> | Lee Lower             |             |  |
| <b>Phone:</b>      | 503-990-0432          | <b>Fax:</b> |  |
| <b>Email:</b>      | Lee.Lower@state.or.us |             |  |