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COMMITTEE REPORT

February 13, 2019

**H. 3131**

Introduced by Reps. Bernstein, Thayer, Ligon, Cobb‑Hunter, Henegan and Hewitt

S. Printed 2/13/19--H.

Read the first time January 8, 2019.

**THE COMMITTEE ON JUDICIARY**

To whom was referred a Bill (H. 3131) to amend Section 63‑9‑80, Code of Laws of South Carolina, 1976, relating to the required disclosure of information to a prospective adoptive parent, etc., respectfully

**REPORT:**

That they have duly and carefully considered the same and recommend that the same do pass:

PETER M. MCCOY, JR. for Committee.

**A** **BILL**

TO AMEND SECTION 63‑9‑80, CODE OF LAWS OF SOUTH CAROLINA, 1976, RELATING TO THE REQUIRED DISCLOSURE OF INFORMATION TO A PROSPECTIVE ADOPTIVE PARENT, SO AS TO PROVIDE THAT BIOLOGICAL PARENTS MAY PROVIDE THEIR PERSONAL MEDICAL HISTORY INFORMATION AT THE TIME OF CONSENT OR RELINQUISHMENT FOR THE PURPOSES OF ADOPTION, TO PROVIDE THAT, IF THE INFORMATION IS PROVIDED, THEN IT SHALL BE MADE AVAILABLE TO THE PROSPECTIVE ADOPTIVE PARENT, AND TO PROVIDE THAT THE INFORMATION ALSO MUST BE DEPOSITED WITH THE COURT AND MAY BE MADE AVAILABLE TO THE ADOPTEE WHEN THE ADOPTEE REACHES THE AGE OF MAJORITY OR, PRIOR TO THAT TIME, IF IT IS IN THE BEST INTEREST OF THE CHILD.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Section 63‑9‑80 of the 1976 Code is amended to read:

“Section 63‑9‑80. (A) Prior to and at the time the department places a child with a prospective adoptive parent for purposes of adoption, the department shall disclose to the prospective adoptive parent all information known by the person making the placement or reasonably accessible to the person making the placement that is necessary to provide adequate care and supervision for the child and to protect the health and safety of the child and the prospective adoptive parent’s family. The information that must be disclosed to the prospective adoptive parent pursuant to this section includes, but is not limited to, medical and mental health conditions and history of the child, the nature of abuse or neglect to which the child has been subjected, behavioral strengths and challenges, and matters related to the child’s educational needs. If the department does not have this information at the time of making the placement, a member of the child’s casework team or the child’s caseworker shall contact the prospective adoptive parent and provide the information known to the casework team or reasonably accessible during the first working day following the placement. The child’s caseworker shall research the child’s record and shall supplement the information provided to the prospective adoptive parent no later than the end of the first week of placement if additional information is found. When the child’s caseworker acquires new information which is likely to affect either the ability of the prospective adoptive parent to provide adequate care and supervision for the child or is likely to place the health and safety of the child or the prospective adoptive parent’s family at risk, the department shall disclose that information to the prospective adoptive parent. The obligation to provide this information continues until the adoption is finalized.

(B)(1) In addition to the information disclosed to the prospective adoptive parent in subsection (A), a medical history of the adoptee’s biological parents also must be disclosed if the biological parents elected to provide that information as provided in item (2).

(2) At the time that consent or relinquishment for the purpose of adoption is given by a person required to do so pursuant to Section 63‑9‑310(A)(2) through (5), the person giving consent or relinquishment may provide a medical history of the adoptee’s biological parents. The medical history must be in a form that does not disclose any personally identifiable information of the biological parents.

(3) If a medical history is disclosed pursuant to item (1), then the medical history also must be deposited with the family court that enters a final decree of adoption pursuant to Section 63‑9‑750. The medical history may be disclosed to the adoptee upon reaching the age of majority or under circumstances prior to the adoptee reaching the age of majority if it is in the best interest of the child.”

SECTION 2. This act takes effect upon approval by the Governor.

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