



Forest County
Department of Social Services
200 E. Madison St. Crandon, WI 54520
Phone: 715-478-3351 Fax: 715-478-2847

Date: _____

To: _____

We have received a request from you to release copies of Forest County Department of Social Services records. Please complete the enclosed "Request for Records" and required HIPAA authorization forms in entirety and return them to our agency. Your request will be considered at that time.

Please be advised that Forest County Department of Social Services records are considered highly confidential and protected health information under Federal HIPAA laws and WI State Statutes. Our agency "Procedures for Release of Child and Family Services Records" and Forest County's "Notice of Privacy Practices" pamphlet is included with this records request packet for your review and to keep for future reference.

If you have any questions about the policies and procedures for release of Child and Family Services unit records, you should call 715-478-3351. If you have any questions about the HIPAA Privacy Practices, you should contact the Forest County Privacy Officer at the location and phone number listed on the back of the yellow pamphlet.

Thank you,

Heidi Blaszczyk, Director

Forest County Department of Social Services



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PROCEDURES FOR RELEASE OF RECORDS CHILD AND FAMILY SERVICES UNIT

Requests must be made in writing on the "Request for Records" form.

Required HIPAA authorization forms must also be completed in entirety and returned before your request is considered.

Your request will be reviewed by the Forest County Department of Social Services Supervisor. Forest County Department of Social Services Director is the designated custodian of these records.

We do not re-release copies of information provided to our agency by another agency or court. You must request copies of those records directly from that agency/court according to their records release procedures. This includes, but is not limited to: court records, police reports, medical records, school records, and therapist reports.

Request will receive a reply within 30 days. If your request is denied, requestor will be informed of the reasons.

Please read carefully:

You may have the right to receive copies of Forest County Department of Social Services records:

If you are an adult, age 18 or older, you have the right to request a copy of **YOUR RECORD**.

If you are an adult, age 18 or older, you have the right to request a copy of **YOUR CHILD'S RECORD**.

If you are a minor, under the age of 18, you must have this authorization **SIGNED BY ONE OF YOUR PARENTS**.

If you are the **SUBJECT** of a report, you have a right to request a copy of the record in which you are **NAMED AS THE SUBJECT**.

Copies of Forest County Department of Social Services records are released according to HIPAA laws, Wisconsin State Statutes, and agency policy. Portions of records may be deleted in accordance with one or more of these.



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REQUEST FOR RECORDS

Custodian of the Record

Contact Person: Heidi Blaszczyk, Director of Forest County Department of Social Services

Subject of the Record

Child's Name: _____ DOB: _____

Address: _____

Parent's Name(s): _____

Nature of the Record Requested

BE SPECIFIC, e.g., dates; worker name; type or record; description of incident(s):

HIPPA laws, Wisconsin State Statutes, and agency policy dictate what information maintained in Child and Family Services unit records may be released. Any reference to a reporter must be deleted.

You will need to provide identification to our receptionist and also pay 25 cents per page for copies prior to release of these documents to you.

You are also advised that pursuant to s. 48981(7)(e) &(f), Wisconsin Statutes, you can not disclose this information further and that any person who permits or encourages unauthorized dissemination may be fined not more than \$1,000.00, imprisoned not more than six months, or both.

Requestor's Name-printed

Requestor's Signature

Date

Requestor's Address and Phone Number

Relationship to Child