Safe Place for Newborns law keeps infants safe

The Safe Place for Newborns law provides an anonymous alternative for mothers to safely give up their newborns. Enacted in 2000 and amended in 2012, the law allows a mother, or a person who has her permission, to anonymously leave her newborn at a safe place, including hospitals, health care facilities that provide urgent care services or an ambulance dispatched in response to a 9-1-1 call, without fear of prosecution. Information on the law and other information, including brochures, information cards and posters, are available at SafePlaceMN.org.

Minnesota law

A person may anonymously leave a newborn with an employee of a hospital or medical facility providing urgent care during its hours of operation, or with an ambulance responding to a 9-1-1 call, provided the newborn:

- Is 7 days old or younger.
- Appears to be unharmed.
- Is left by a mother or a person who has a mother’s approval.

Within these conditions, hospital, urgent care or ambulance staff will not share any information about the mother or call the police, but may ask about medical history of the mother, newborn and the newborn’s birth relatives.

Immediate care

Upon receiving a newborn, staff will contact the local social services agency to:

- Verify the circumstances of the newborn’s arrival and assess health and safety needs.
- Offer services.
- Make arrangements for temporary care.
- Begin permanency planning, which may include adoption proceedings.

If, prior to finalization of an adoption, a person presents herself as the mother of a newborn left under the Safe Place for Newborns law and wants the child returned to her care, the local social services agency will conduct a child maltreatment assessment according to the requirements of Minnesota law. The local social services agency may not determine that maltreatment has occurred based solely on the mother’s decision to utilize the Safe Place law.
Situations not covered by the law

The Safe Place for Newborns law does not apply if mothers give birth in a hospital, as a hospital delivery creates a vital record and anonymity is no longer possible. If a newborn is of American Indian descent, provisions of the Indian Child Welfare Act will apply and counties will contact the nearest tribal social service office to identify the child’s family.