

## CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

**Date:** September 17, 2012

**Agency Name:** Division of Child and Family Services

**Agency:** 1735 Kaiser Street

**Address:** Fallon, Nevada 89406

**Date of written notification to the Division of Child and Family Services and Legislative**

**Auditor:** August 22, 2012

**Internal reference UNITY ID or Report Number: 1268554**

**Type of Report:**  48 Hour Notice  15 Day Update  30 Day Update  Final

**Child Fatality** **Date of Death:** August 24, 2012

**Fatality**

**Near Fatality** **Date of Near Fatality:** August 18, 2012

**Fatality**

**Portions of information on this form have been withheld at the request of Churchill County law enforcement.**

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### Information for Release:

**A. Date of the notification to the child welfare agency of the death of a child:**

August 18, 2012

**B. Location of child at the time of death or near fatality (city/county):**

Near Fatality: Fallon, Churchill County

Fatality: Reno, Washoe County

**C. A summary of the report of abuse or neglect and a factual description of the contents of the report:**

The Division of Child and Family Services was notified that the minor child is in the hospital due to a drowning incident in a canal; child is currently on life support.

**D. The date of birth and gender of child:**

June 5, 2006, Male

**E. The date that the child suffered the fatality or near fatality:**

Near Fatality: August 18, 2012

Fatality: August 24, 2012

**F. The cause of the fatality or near fatality, if such information has been determined:**

Severe hypoxic ischemic encephalopathy and acute respiratory distress syndrome

- G. Whether the agency had any contact with the child or a member of the child's family or household before the fatality or near fatality and, if so:** (1) The frequency of any contact or communication with the child or a member of the child's family or household before the fatality or near fatality and the date on which the last contact or communication occurred before the fatality or near fatality;
- (2) Whether the agency which provides child welfare services provided any child welfare services to the child or to a member of the child's family or household before or at the time of the fatality or near fatality;
- (3) Whether the agency which provides child welfare services made any referrals for child welfare services for the child or for a member of the child's family or household before or at the time of the fatality or near fatality;
- (4) Whether the agency which provides child welfare services took any other actions concerning the welfare of the child before or at the time of the fatality or near fatality; and
- (5) A summary of the status of the child's case at the time of the fatality or near fatality, including, without limitation, whether the child's case was closed by the agency which provides child welfare services before the fatality or near fatality and, if so, the reasons that the case was closed.

The family has had previous involvement with child welfare agencies in Nevada and Oregon. The Nevada history is as follows:

April 21, 2003 an allegation of physical neglect was investigated and found to be unsubstantiated. The family was referred to community services.

January 5, 2004 an allegation of neglect/threat of harm was investigated and found to be substantiated. The family was provided with in home support services.

June 20, 2006 an investigation of neglect (lack of necessity) and neglect/threat of harm was investigated and found to be unsubstantiated. The family was provided referrals to community services and in home services.

August 25, 2010 the family was assessed and provided referrals to community services by a Differential Response provider due to a report of mental injury.

December 14, 2010 an allegation of mental injury was investigated and found to be unsubstantiated.

- H. Whether the agency which provides child welfare services, in response to the fatality or near fatality:** (1) Has provided or intends to provide child welfare services to the child or to a member of the child's family or household; and (2) Has made or intends to make a referral for child welfare services for the child or for a member of the child's family or household; and (3) Has taken or intends to take any other action concerning the welfare and safety of the child or any member of the child's family or household.

The Division is currently investigating the incident resulting in the fatality.

#### NON-DISCLOSURE NOTICE

The following information must not be released (see Policy on Public Disclosure of Child Fatality and Near Fatality Information, page 4): 1) Information regarding the sibling(s) of a deceased child; 2) the name of the reporting party or individual making an allegation or referral will not be released; 3) if the disclosure of the information would adversely affect any pending investigation concerning a report (NRS 432B.290(3)); 4) if the disclosure violates other federal or state law, including, but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Family Educational and Privacy Act of 1974 (FERPA), alcohol and drug abuse patient records (42 USC §290dd-2 and 42 CFR §212 (c)(6)), and any other applicable law.