## CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

Date: September 11, 2017

Agency Name: Washoe County Department of Social Services

Agency Address: P.O. Box 11130

**Date of written notification to the Division of Child and Family Services and Legislative Auditor:** September 11, 2017

Internal reference UNITY ID or Report Number: Case # 1416964; report # 1752018

Type of Report:\Box 48 Hour Notice15 Day Update30 Day UpdateFinalChild FatalityDate of Death:

Near Fatality Date of Near Fatality: September 8, 2017

**Portions of information on this form have been withheld at the request of** 

\_\_\_\_\_law enforcement.

(Name of agency)

## Information for Release:

- A. Date of the notification to the child welfare agency of the death of a child: This is a near fatality case and the agency was notified of this event on September 8, 2017
- **B.** Location of child at the time of death or near fatality (city/county): Washoe County
- C. A summary of the report of abuse or neglect and a factual description of the contents of the report:

Child was found non-responsive by the mother, REMSA was called and the mother administered CPR until help arrived. Child was breathing when transported to the hospital however was having difficulty tracking with her eyes and was presenting as very lethargic.

- **D.** The date of birth and gender of child: May 2, 2017; female child
- **E.** The date that the child suffered the fatality or near fatality: September 8, 2017
- **F.** The cause of the fatality or near fatality, if such information has been determined: The circumstances leading to the child not breathing are currently being investigated.

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

(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.

5/23/16- report received alleging domestic violence between the parents. The report was assigned and unsubstantiated. There was no evidence to suggest this was an on-going pattern in the family.

## 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.

Case has been assigned as an investigation. Other children in the home were assessed as safe upon initial contact. Assessment continues for impending danger.

## 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.