

CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

Date: March 15, 2024

Agency Name: Division of Child & Family Services

Agency Address: 1780 E. Basin Ave, Ste. #2 Pahrump, NV 89060

Date of written notification to the Division of Child and Family Services and Legislative Auditor: March 4, 2024

Internal reference UNITY Case Number: 1520737

- Child Fatality** **Date of Death:** March 4, 2024
 Near Fatality **Date of Near Fatality:**
 Portions of information on this form have been withheld at the request of _____ (Name of agency) law enforcement agency.
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INFORMATION FOR RELEASE

A. Date of the notification to the child welfare agency of the fatality/near fatality of a child:

March 4, 2024

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

Pahrump, Nye County

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

D. Child reported stomach issues including vomiting and diarrhea. After being placed to bed, the next day, the child was found unresponsive, with vomit in child's mouth. CPR was initiated and continued until police and medical arrived. An EpiPen was administer by foster parent, although it was not prescribed nor recommended by 911.

E. The date of birth and gender of child:

December 17, 2022. Female child.

F. The date that the child suffered the fatality or near fatality:

March 4, 2024

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

Coroner's report is still pending. Will be requested.

H. 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: None.
- (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: None.
- (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: None.
- (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: None.
- (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.

Child Protective Services in Clark County had and has an open case with this family. The child in question was in the custody of Clark County, at the time of the fatality. There was no contact nor communication occurring before the fatality by DCFS/Nye County.

The information contained in this section is limited to contact(s) with the child who is the subject of this disclosure or a member of that child's family or household that is related to the fatality or near fatality incident. This limitation is required to preserve the confidentiality of all child abuse and neglect reports and records in order to protect the rights of the child and family as mandated by the Child Abuse Prevention and Treatment Act (CAPTA), as amended (42 U.S.C. 5101 et seq.).

Agencies to check with legal representation if language is needed.

I. 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.

Referral for grief counseling was mailed to the family from the Nye County DCFS office. No other services will be provided nor are needed from the family at this time. There is no other action to be taken by this DCFS / Nye County office at this time.

NON-DISCLOSURE NOTICE

The following information must not be released (see Policy on Public Disclosure of Child Fatality and Near Fatality Information, page 5): 1) Information regarding the sibling(s) of a deceased child; 2) a privileged communication between attorney and client; 3) information regarding the sibling(s) of a deceased child; 4) the name of the reporting party or individual making an allegation or referral will not be released; 5) if the disclosure of the information would adversely affect any pending investigation concerning a report (NRS 432B.290(4)-(5)); 6) 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.