CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

Date: 9/19/25	
Agency Name: DCF	S
Agency Address: 10	010 Ruby Vista Dr. Suite 101, Elko, NV 89801
	ication to the Division of Child and Family Services and Legislative Auditor: 11/26/25 NITY Case Number: 1358926
☐ Child Fatality	Date of Death:
Near Fatality	Date of Near Fatality: 9/19/2025
☐ Portions of info	rmation on this form have been withheld at the request of(Name of agency)_ law enforcement
agency.	

INFORMATION FOR RELEASE

- A. Date of the notification to the child welfare agency of the fatality/near fatality of a child: 9/19/2025
- B. Location of child at the time of death or near fatality (city/county): Elko. NV
- C. A summary of the report of abuse or neglect and a factual description of the contents of the report: On 9/19/2025, The Division of Child and Family Services (DCFS) received a report that on 9/18/2025 infant was born blue, limp, and was not breathing with an APGAR score of 1. The infant required resuscitation, and once revived, immediately went into a seizure due to "rapid withdrawal" from methamphetamines. The mother and infant both tested positive for methamphetamines at time of birth. The infant was given Narcan, which stopped the seizure, however, the infant remained in respiratory distress. The infant was care flighted to Utah hospital for additional medical care.
- D. The date of birth and gender of child: 9/18/2025, male

Date: 12/03/2021

- E. The date that the child suffered the fatality or near fatality: 9/18/2025
- F. The cause of the fatality or near fatality, if such information has been determined: Infant was born blue, limp, and not breathing as a result of in-utero substance exposure to methamphetamines.
- 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;

Between 2009-2022 - Mother had 8 investigations: 4 unsubstantiated, 4 substantiated for other child(ren) no longer in her care.

9/19/2025: DCFS investigation opened for this incident

- (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;
 - 2011 2012: Mother was provided case planning services to address mental health, substance use, violence, primary care needs, budgeting/financial needs, anger management, parenting skills

2011-2012: Mother had open DCFS case. Case closed due to children being adopted.

2022: Mother had an open DCFS case and was provided case planning services to address daily routines, mental health, skills training, substance use, violence, parenting classes, and parenting education. Case closed due to child being placed on a guardianship.

Mother was not involved with DCFS at the time of the 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;

Mother was referred for services through previous DCFS cases to address concerns with parenting skills, mental health, substance use, and violence.

(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

DCFS opened an investigation into the family. Emergency custody was taken of the child.

(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 previous cases were closed due to alternative permanency plans being achieved for the children. There was not an open DCFS case at the time of the near fatality.

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.).

- 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 agency has opened and will complete an assessment of family.

Date: 12/03/2021

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.