

CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

Date: 1/3/2025

Agency Name: Division of Child and Family Services

Agency Address: 1010 Ruby Vista Drive, Suite 101, Elko NV 89801

Date of written notification to the Division of Child and Family Services and Legislative Auditor: 1/3/2025

Internal reference UNITY Case Number: 1531006

- Child Fatality Date of Death: 1/2/25
 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: 1/2/2025

B. Location of child at the time of death or near fatality (city/county): Salt Lake City, UT

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

Child was transferred to UT hospital due to being in cardiac arrest. Father reported a thud from the other room, mother was at work. Imaging showed a bleed between her brain and skull and anomic injury. She had bleeds in both eyes, and separation of her eyes from the retinas. This is consistent with shaking injury, and other studies are consistent with a major trauma and not with dad's story of events. She had to be revived multiple times and was on a ventilator that was breathing for her. Mother signed a DNR and the child was taken off the ventilator after a brain death exam was completed and the child was declared brain dead.

D. The date of birth and gender of child: 5/6/2024 Female

E. The date that the child suffered the fatality or near fatality: 12/31/2024

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

Non-accidental injuries that will be fatal (subdural hematoma, bruising on forehead and chest)

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;

4-4-2016 Father substantiated for neglect, 12/21/2011- father substantiated for neglect/physical risk

(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;

No services were provided to the father during either 12/2011 nor the 4/2016 investigations

(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; and

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.

N/A-Father's previous cases were regarding other children.

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.

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.

There are no other children in the home, so the agency will not be providing services to the family outside of referrals for the mother for grief and loss support.

[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.