

COMPLETING A PUBLIC DISCLOSURE

The following outlines the information that will be provided to the Nevada Division of Child and Family Services for public release.

Disclosure to the public of a fatality or near fatality on the “Child Welfare Agency Public Disclosure Form” will include the following information, as available (Note that letters and numbers below correspond with FPO Form 0401A):

Top of the Form:

- **Date:** *date submitting this form*
- **Agency Name:** *Local child welfare agency*
- **Agency Address:** *Local child welfare agency’s address*
- **Date of written notification to the Division of Child and Family Services and Legislative Auditor:** *Date of initial child fatality/near fatality public disclosure submission*
- **Internal reference UNITY ID Number:** *The UNITY case number*
- **Child Fatality – Date of Death:** *Check box if this is a fatality PD and the date of the fatality*
- **Near Fatality – Date of Near Fatality:** *Check box if this is a near fatality PD and the date of the incident*
- **Portions of information on this form have been withheld at the request of (Name of Agency) law enforcement.** : *If the local law enforcement agency is requesting that information not be disclosed, check the box and enter the name of the agency.*

“INFORMATION FOR RELEASE” section of the Form:

- A. Date of the notification to the child welfare agency about the fatality or near fatality of the child:** *Date the local child welfare agency became aware of the near fatality or fatality.*
- B. Location of child at time of death or near fatality (city/county):** *The city and county where the near fatality occurred or where the child died*
- C. A summary of the report of abuse or neglect and a factual description of the contents of the report:** *A brief description of the circumstances surrounding the near fatality or the death and if there are any allegations of possible abuse or neglect. Note in this section if the public disclosure is being submitted pursuant to jurisdictional agency practice in cases where there is no suspicion of abuse or neglect but it is being submitted because of the family’s prior history with the agency. Any confidential information about the reporting party, family or a member of the household or graphic nature of the event should be excluded.*
- D. The date of birth and gender of the child:** *The child’s date of birth and gender*
- E. The date that the child suffered the fatality or near fatality:** *The date of the fatality or near fatality*
- F. The cause of the fatality or near fatality, if such information has been determined:** *The official cause of the fatality as reported by the official coroner’s documentation. Should be documented as pending until official finding has been made.*
- G. Whether the agency which provides child welfare services 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; and**

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 required

List if the agency had any previous contact with the child or a member of the child's family or household regardless of how long the case was open or the outcome of the investigation. Include any information if services were provided, referrals made or any other actions concerning the welfare of the child before or at the time of the fatality or near fatality. If the family had previous history with the child welfare agency, give a summary of the status of the child's case at the time of the fatality or near fatality. This section should include the date, reason for referral or report and the finding.

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.**

This section should include services, referrals or any other actions taken by the child welfare agency in response to the near fatality or near fatality. If a final determination of the finding of the case has been made it should be noted in this section, if applicable per [NRS432B.290\(4\),\(5\)](#).

EXAMPLES FOR KEEPING CONFIDENTIALITY OF COMMONLY USED TERMS

Actual language	Use this instead
Grandma or Uncle	Household member
Brother or Sister	Relevant household member
Identified caretaker	Babysitter or caretaker
Gunshot wound to the head	Head injury
Child was found in couch cushion	Child was found unresponsive due to an unsafe sleep environment
Child found with cord wrapped around its neck	Child was found unresponsive
Reno PD Law enforcement reported to the child welfare agency	Child welfare agency received a report of....
Renown or University Medical Center	Local hospital