CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

Date: 5/15/2025
Agency Name: Division of Child and Family Services
Agency Address: 1735 Kaiser St, Fallon, NV 89406
Date of written notification to the Division of Child and Family Services and Legislative Auditor: 5/15/25
Internal reference UNITY Case Number: 1535065

☒ **Child Fatality** **Date of Death: 5/14/2025**
☐ **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.**

INFORMATION FOR RELEASE

A. Date of the notification to the child welfare agency of the fatality/near fatality of a child: 5/15/2025

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

C. A summary of the report of abuse or neglect and a factual description of the contents of the report:
Child was transported to local hospital by father and grandfather on 4/26/2025. Father reported he was giving the baby a bath when the baby swallowed some water and stopped breathing. Child was unresponsive at the hospital and was given CPR to revive him. Child was then transported to another local hospital by ambulance where he was placed on a ventilator. A head CT was performed revealing a skull fracture, right frontal subdural hematoma, and chronic bilateral subdural hematoma. These findings do no corroborate the father's account of the child swallowing bath water. The father and mother did not accompany the child to the hospital by ambulance at 2am, and when they were contacted at 3am, they indicated they would not leave for the hospital until 4am. Father has another son in another city. Between 4/26/2025 and 5/14/2025, repeated CT scans, MRI's and other testing were completed. These tests revealed extensive brain injuries at different ages/ stages of healing to include 1) bilateral holohemispheric subdural hematomas with evidence of acute and subacute hemorrhage 2) Acute subdural hematomas in the left frontal and left parietal occipital regions 3) Acute subdural hematoma beneath the right cerebellar hemisphere 4) Minimal subacute subdural hematomas about the cerebellar hemispheres bilaterally 5) Gyriform areas of increased diffusion-weighted signal intensity in the right frontal and parietal occipital regions, as well as the basal ganglia and medial temporal lobes consistent with areas of acute anoxic injury, with no congenital/ developmental anomalies evident, 6) Retinal hemorrhaging of both eyes 7) pulmonary edema and devastated neurological status. The child's condition did not improve during his hospital stay and he would likely be blind, deaf, and immobile if he were to live. Due to this, the family opted for comfort care only measures rather than life sustaining measures, such as a tracheotomy. The child's family elected for withdrawal of comfort care measures to allow natural death on 5/14/2025. The family agreed to organ donation after circulatory death. The child was removed from the ventilator and comfort medications were given along with heparin on 5/14/2025 at 1:47pm. Time of death was 2:37pm.

D. The date of birth and gender of child: 11/20/2024, Male

E. The date that the child suffered the fatality or near fatality: 5/14/2025

F. The cause of the fatality or near fatality, if such information has been determined: Not determined at this time

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 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.

At the time of the near fatality, the family has no child welfare history in NV, and no services had previously been provided to the family in NV. At the time of the fatality, the agency is completing their initial assessment, which will likely lead to the case remaining open for ongoing services to the family. The child's 7-year-old sibling was placed on an out-of-home safety plan with a family member where they will remain until the conclusion of the assessment. This placement will be re-evaluated at the conclusion of the assessment.

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.

At the time of the near fatality, the family has no child welfare history in NV, and no services had previously been provided to the family in NV. At the time of the fatality, the agency is completing their initial assessment, which will likely lead to the case remaining open for ongoing services to the family. The child's 7-year-old sibling was placed on an out-of-home safety plan with a family member where they will remain until the conclusion of the assessment. This placement will be re-evaluated at the conclusion of the assessment.

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.