December 23, 2016

ALL COUNTY LETTER NO. 16-109

TO: ALL COUNTY WELFARE DIRECTORS
   ALL CHILD WELFARE SERVICES PROGRAM MANAGERS
   ALL CHIEF PROBATION OFFICERS
   ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: CHILD FATALITY AND NEAR FATALITY REPORTING AND PUBLIC DISCLOSURE REQUIREMENTS

REFERENCE: TITLE 42 UNITED STATES CODE (U.S.C.) SECTION 5106a; UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE POLICY MANUAL SECTION 2.1A.4; WELFARE AND INSTITUTIONS CODE (WIC) SECTION 10850.4; WIC SECTION 10850.45; WIC SECTION 827; SENATE BILL 39 (CHAPTER 468, STATUTES OF 2007); ASSEMBLY BILL 1625 (CHAPTER 320, STATUTES OF 2016); ALL COUNTY LETTER (ACL) 08-13

The purpose of this ACL is to implement federal and state law by updating the State’s definition of “near fatality” and implementing new public disclosure policy when child abuse or neglect results in a child’s near fatality. The ACL also discusses a revision to the State’s child fatality disclosure requirements.
Background

In California, federal and state laws govern the reporting and disclosure requirements related to child fatalities and near fatalities that are determined to be the result of abuse and/or neglect. The federal Child Welfare Policy Manual Section 2.1A.4 clarifies the content of the “findings and information” that must be disclosed in child fatality and near fatality cases pursuant to the Child Abuse Prevention and Treatment Act (CAPTA). States must develop procedures for the release of information including, but not limited to: the cause and circumstances of the fatality or near fatality, the age and gender of the child, information describing any previous reports of child abuse or neglect investigations that are pertinent to the abuse or neglect that led to the fatality or near fatality, the result of any such investigations, and the services provided and actions taken on behalf of the child that are pertinent to the abuse or neglect that led to the fatality or near fatality. Assembly Bill 1625, enacted in September 2016, brings California into full compliance with this federal requirement by adding Section 10850.45 and amending Section 10850.4 of the Welfare and Institutions Code (WIC).

Reporting Fatalities and Near Fatalities to the California Department of Social Services (CDSS)

All child fatalities and near fatalities currently are subject to the reporting requirements stated in ACL 08-13. As such, the requirement remains in effect to submit a State of California (SOC) 826 form to the CDSS within ten business days of receiving or making a determination that abuse or neglect resulted in a fatality or near fatality. Near fatalities that occur before January 1, 2017 should be reported and disclosed according to the definition and instructions given in ACL 08-13.

For near fatalities that occur on or after January 1, 2017, reporting requirements will change, as described below. Also described below is an expansion of disclosures for fatalities.

Definition of Near Fatality

For near fatalities that occur on or after January 1, 2017, WIC 10850.45(/l)(4)(A) adopts the federal definition under CAPTA of “near fatality:”
Pursuant to 42 U.S.C. 5106a (b)(4)(A): “the term ‘near fatality’ means an act that, as certified by a physician, places the child in serious or critical condition.”

There is no time limit or requirement on how long a child must be in “serious” or “critical” condition for disclosure and reporting purposes.

For near fatalities that occur on or after January 1, 2017, this updated definition replaces the prior definition of “near fatality” found in ACL 08-13, which defined a near fatality as “a severe childhood injury or condition caused by abuse or neglect which results in the child receiving critical care for at least 24 hours following the child’s admission to a critical care unit(s).” Counties shall use the updated definition in all cases of near fatalities that occur on or after January 1, 2017, when abuse or neglect led to the near fatality.

In determining if a near fatality is subject to reporting and disclosure, the county must verify that both of the following conditions have been met:

1) That a physician has certified that the child was in critical or serious condition, and
2) Either: A) that a law enforcement investigation has concluded that child abuse or neglect occurred; or B) a county child welfare services agency substantiated the child abuse or neglect.

A near fatality should be reported and disclosed upon request, once both of these conditions have been met.

In accordance with WIC 10850.45(l)(1), the county shall not report nor disclose on child near fatalities caused by the following persons, unless neglect by the parent, guardian, foster parent or resource family contributed to the near fatality:

- An alleged perpetrator who was unknown to the child or family prior to the near fatality
- A minor, unless acting in the role of a caregiver.

**Certifying and Recording the Child’s Condition in Child Welfare Services/Case Management System (CWS/CMS)**

When a report of child abuse or neglect is received indicating that a child has been hospitalized, the hotline screener will inquire as to the child’s medical condition (such as
critical, serious, fair, stable, etc.). If unknown at the time of the report, this information shall be obtained and verified by the investigating social worker in the course of the investigation.

The certification that the child is in “serious” or “critical” condition must be made only by a physician. A nurse, hospital employee or other person cannot make this certification; although they may confirm or provide documentation that a physician has done so. For the purposes of near fatality disclosures, a physician’s “certification” that a child is in serious or critical condition does not require the submission of a specific document or form. The social worker may obtain this certification information in any of several ways:

1) If the social worker communicates with the physician directly, either verbally or in writing, the social worker shall confirm the child’s condition and document the condition and the date of the conversation, email or other communication.
2) If the social worker communicates with a nurse, hospital social worker or other hospital staff member, the social worker shall inquire as to the child’s condition as it is noted in the child’s medical chart or electronic medical record. It is not necessary that the social worker personally view the record, only that he or she receives an assurance that the condition is documented in writing. The social worker shall inquire as to the name of the physician who noted the child’s condition and the date the condition was diagnosed and document this information.
3) If the social worker communicates with an individual other than the certifying physician, and the information regarding the child’s condition is not documented in the child’s medical chart or electronic medical record, then the social worker must either communicate with the physician directly or request that the nurse, hospital social worker or staff member provide documentation of the child’s condition. This documentation may take the form of an email from the physician’s hospital email address, a note on letterhead signed by the certifying physician or by requesting the certifying physician to personally call the social worker and verify the child’s condition.

Please note that in accordance with WIC 10850.45(l)(4)(B), it is the responsibility of child welfare and/or law enforcement to determine if abuse or neglect occurred leading to the child’s near fatality, though CWS or law enforcement also may consult with medical professionals as part of the investigative process.
Information as to the child’s condition should be documented in CWS/CMS in the delivered service log and the child’s Health Passport in the hospitalization tab, as noted in the examples below:

Delivered Service Log
Sept. 17, 2017: Telephone call with Nurse Nancy Smith. Nurse Smith reports that child is in critical condition, as evidenced by child’s medical record and admittance to ICU. Child’s condition was certified by Dr. Emma Martinez on Sept 16, 2017.

CWS/CMS Hospital Passport
1) Client Management Section
2) Open Existing Health
3) Hospitalization Tab

Enter the date of the abuse or neglect that led to the near fatality, if known, as the “Onset Date” and enter the child’s admission date to the hospital as the “Admit Date.” If the date of the abuse or neglect that led to the near fatality is unknown, leave the “Onset Date” field blank. If the date of the near fatality incident becomes known later in the course of the investigation, the social worker must update the field.

Enter the name of the attending physician who certified the child to be in serious or critical condition in the “Attending Physician” box.
Enter the child’s condition of either “serious” or “critical” in the “Hospitalization Comments” box. Include a notation regarding from whom and in what manner the information regarding the child’s condition was received. If the child was not in serious or critical condition on the day of the admission or the attending physician is different from the physician who certifies the child to be in serious or critical condition, include the name of the certifying physician and the date he or she certified the child to be in serious or critical condition in the “Hospitalization Comments” section.

If a physician uses a term or description other than “serious” or “critical,” then the county shall consult with the medical staff and county counsel, as appropriate, to determine if the child’s medical condition is equivalent to “serious” or “critical” and meets the standards for disclosure. In this case, the county should note the child’s condition as certified by the physician and include a note as to why this condition meets the requirements for a near fatality. For example, the “Hospitalization Comments” section may state “Child’s condition on his medical chart is listed as “grave.” Dr. Martinez indicates that a condition of “grave” is substantially similar to a condition of “critical.”

**Release of Information in Cases of Child Near Fatalities Caused by Abuse or Neglect**

Currently, only the information contained in the SOC 826 form is disclosed in the event of a child near fatality, and the responsibility for this disclosure lies with the CDSS.

Counties shall be responsible for publically disclosing, upon request, the following information regarding near fatalities that meet the new state definition and occur on or after January 1, 2017. The disclosure shall consist of a written report (the SOC 826A) and specified case file documents. With the exception of the information detailed in WIC 10850.45(a), as outlined below, all disclosed information shall be released within 30 calendar days of the request for information or the disposition of the investigation, whichever is later, in accordance with WIC 10850.45(e)(1).

**RELEASE OF INFORMATION**

Counties shall release information required by WIC 10850.45(a), upon request, within ten business days of learning that a child near fatality has been determined by child welfare and/or law enforcement to have been caused by abuse or neglect. The
information shall not be disclosed upon reasonable suspicion, as is the case with child
fatalities. Only after abuse or neglect has been determined to have caused the near
fatality should release take place. The county child welfare agency shall release the
following information, per WIC 10850.45(a):

1) The age and gender of the child.
2) The date of the near fatality.
3) Whether the child resided in foster care or in the home of his or her parent or
guardian at the time of the near fatality.
4) Whether an investigation is being conducted by a law enforcement agency or the
county child welfare agency.

WRITTEN REPORT (SOC 826A)

Upon receiving a request for a near fatality public disclosure under WIC 10850.45(c),
counties shall produce a written report using the attached SOC 826A form containing
the following information for all cases where a child near fatality has been determined to
be the result of abuse and/or neglect. The SOC 826A shall include all of the following:

1) The age and gender of the child.
2) If known, the date the abuse or neglect occurred that resulted in the near fatality and
   the date a licensed physician determined the child to be in serious or critical
   condition.
3) Whether the child resided in the home of his or her parent/guardian or in foster care
   at the time of the near fatality.
4) The cause of, and circumstances, regarding the near fatality.
5) A description of reports received, child protective or other services provided, and
   actions taken by the county child welfare services agency, and juvenile court, if
   applicable, regarding both of the following:

   - Suspected or substantiated abuse or neglect of the child near fatality victim.
   - Suspected or substantiated abuse or neglect of other children that is related to
     the abuse or neglect of the child near fatality victim.

The written report for the near fatality must include, but is not limited to, the dates of
reports, investigations, services provided, actions taken and the investigative disposition
of each report. Services provided and actions taken may consist of, but is not
necessarily limited to, referrals to community agencies, services provided in the course
of the investigation, differential response, voluntary or informal family maintenance and services provided and actions taken in the course of a court-supervised family maintenance or family reunification case plan. Reports of "suspected or substantiated abuse or neglect" include all prior referrals and reports of abuse or neglect to the child near fatality victim, including evaluated out referrals. It also includes all prior referrals or reports of abuse or neglect of other children pertinent to the abuse and neglect that contributed to the near fatality. Abuse and neglect of other children is not limited only to siblings of the victim, but may also include other minor household members or unrelated children in another household who are a child, current or former stepchild or current or former household member of the perpetrator. WIC 10850.45(c)(5)(B) indicates that it is the nexus between the perpetrator and the critical incident, not the relationship of the children, that makes abuse or neglect of other children pertinent to the abuse or neglect that led to the child’s near fatality.

Findings or information about previous reports, referrals, investigations, services provided, and/or actions taken with regard to the child, the child’s family, and/or members of the child’s household is pertinent to the child abuse or neglect that led to the near fatality, unless determined to be not relevant in accordance with WIC 10850.45(f)(5). The CDSS is formulating guidance and examples of what information should be considered pertinent in a child near fatality disclosure, which will be released in early 2017.

The SOC 826A also must include any written comments provided by the involved social worker or workers in response to the SOC 826A disclosure regarding the investigations, services provided, and actions taken. Counties should ensure that involved social workers are aware of the request for disclosure and have the opportunity to provide a written comment for inclusion in the disclosure. Other than redactions in accordance with the requirements of WIC 10850.45(f), the county shall not redact or alter the social worker’s comments in any way and must include the social worker’s comments in full.

Upon receiving a request for public disclosure, counties shall produce the written report using the attached form, SOC 826A. The SOC 826A and any supporting documents shall be submitted to the CDSS within 20 calendar days of a public request for information or the disposition of the investigation, whichever is later, via electronic file upload to CWS/CMS. Counties shall immediately notify the CDSS in writing that a SOC 826A has been uploaded and is ready for review via email at CIReporting@dss.ca.gov. The email must include the referral number for the near fatality incident.

All documents relied upon in the creation of the SOC 826A that are not already contained within the CWS/CMS shall be uploaded to the documents file in CWS/CMS in advance of the submission for review. In the event that the CDSS feels it is necessary to review a document that is not available in CWS/CMS, the CDSS shall communicate
its request to the county via email or telephone. In the event that CDSS requests that additional documents be uploaded to the case file, counties shall upload or otherwise provide those documents promptly.

The CDSS will review the SOC 826A against case file documents and notify the county contact person identified on the SOC 826A form of its clearance or any discrepancies or other concerns pursuant to WIC 10850.45(e). Counties are encouraged to submit the SOC 826A as quickly as possible and not wait for the authorized 20 calendar day timeline. Similarly, CDSS will strive to complete its review within ten days, so that there is time to make any necessary corrections, additions or edits in advance of public disclosure within the overall 30-day timeframe.

DOCUMENT DISCLOSURE FOR A NEAR FATALITY

Upon request, the following case file documents, along with the reviewed written report, shall be disclosed to the public by the juvenile case file custodian of record within 30 calendar days of the request or the disposition of the investigation, whichever is later.

1) The emergency response referral information form and emergency response notice of referral disposition form completed by the county child welfare agency relating to the abuse or neglect that caused the near fatality of the child.
2) Any cross reports completed by the county child welfare services agency to law enforcement relating to the child suffering the near fatality.
3) All risk and safety assessments completed by the county child welfare services agency relating to the child suffering the near fatality.
4) Copies of police reports, if available, about the person against whom the child abuse or neglect was substantiated.
5) For cases in which the child’s near fatality occurred while the child was in foster care, the following documents must be disclosed in addition to those listed in (1) through (4):
   a. Records pertaining to the foster parents', relative/non-related extend family member’s (NREFM), or resource family’s initial licensing/approval and renewals and type of license or licenses held if in the case file.
   b. All reported licensing violations, including notices of action, if in the case file.
   c. Records of training completed by the foster parents or resource family, if in the case file.
Confidentiality

Counties disclosing on a near fatality must ensure compliance with any relevant confidentiality laws, including requirements applicable to Titles IV-B and IV-E of the Social Security Act. In keeping with WIC 10850.45(f), counties must redact and keep confidential the following information:

1) The names, addresses, telephone numbers, ethnicity, religion, or any other identifying information of any person or institution, other than the county or the State Department of Social Services.
2) Any information that would, after consultation with the district attorney, jeopardize a criminal investigation or proceeding.
3) Any information that is privileged, confidential or not subject to disclosure pursuant to any other state or federal law.
4) All health care records related to the child or the child’s family.

In addition to the confidentiality requirements enumerated above, WIC 10850.45(f)(5) requires that counties redact any information referenced in the SOC 826A and documents that is not relevant to the near fatality, consistent with regulations, ACLs or instructions issued by CDSS. This includes, but is not limited to, any information referenced in the written report and documents regarding any adult whose activities are not part of an event or events or do not have a material bearing on the circumstances that led to the near fatality.

Information regarding the agency’s handling of the case or that has a material bearing on the circumstances that led to the near fatality, or any record of any action or observation of any individual acting in their professional capacity, is relevant and should not be redacted or excluded from the SOC 826A and released documents.

As required by WIC 10850.45(g), the county child welfare agency shall notify and provide a copy of the near fatality disclosure request to the counsel for any child who is directly or indirectly connected to the juvenile case file upon receiving a request for release of the written report and case file documents described in WIC 10850.45(c) and (d). Counsel for a child may object to the release of any part of the information and petition the juvenile court to prevent release. Prior notice to any other individual is not required.
In accordance with WIC 10850.45(h), juvenile case file records that are not subject to disclosure under this statute shall only be disclosed by order of the juvenile court pursuant to WIC 827.

**Updated Requirements for Disclosure in the Event of a Child Fatality**

In addition to the information currently disclosed in the event of a child fatality under WIC 10850.4, counties are directed pursuant to WIC 10850.4(c)(2)(F) to additionally disclose a description of child protective or other services provided and actions taken by the child welfare agency and the juvenile court, if applicable, relating to the deceased child, addressing any services provided or actions taken that are not otherwise disclosed within other released documents. Examples of “services provided and actions taken” could include referrals to community services, home visiting programs, services provided directly by the social worker assigned to the referral or case, visitation orders by the court, or findings and orders by the juvenile court relating to that child that are not otherwise described in the released documents.

The requirement to disclose services provided and actions taken by the child welfare agency on behalf of the deceased child became effective on September 13, 2016, and applies to all child fatalities occurring on or after January 1, 2008, in accordance with WIC 10850.4(m). Counties are instructed to release this information for all requests for fatality disclosure received on or after September 13, 2016. Counties who have previously disclosed child fatality information since January 1, 2008, are not required to release this additional information on services and actions taken, unless a new disclosure request is received on or after September 13, 2016.

When providing the description of a fatality, the county must redact the following information enumerated in WIC 10850.4(e):

1) The names, addresses, telephone numbers, ethnicity, religion, or any other identifying information of any person or institution, other than the county or the CDSS.

2) Any information that would, after consultation with the district attorney, jeopardize a criminal investigation or proceeding.

3) Any information that is privileged, confidential, or not subject to disclosure pursuant to any other state or federal law.
Under current law, in the event of a child fatality that is determined to be the result of abuse or neglect, counties have ten business days from the date of the request for disclosure or the disposition date of an investigation, whichever is later, to produce case file documents redacted in accordance with WIC 10850.4(e). Counties will have an additional ten business days after the release of those documents to produce and release the description of services provided and actions taken that are not otherwise disclosed within the released documents. The description must be released no later than a total of 20 business days after the date that the information is requested or the disposition of the investigation, whichever is later.

If you have any questions regarding this information, please contact the Children’s Services Operations Bureau at childfatality@dss.ca.gov or (916) 651-8100.

Sincerely,

Original Document Signed By:

GREGORY E. ROSE
Deputy Director
Children and Family Services Division

Attachments
<table>
<thead>
<tr>
<th><strong>Within 5 business days</strong></th>
<th><strong>Within 10 business days</strong></th>
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<tbody>
<tr>
<td><strong>Child Fatalities</strong></td>
<td><strong>Child Near Fatalities</strong></td>
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<tr>
<td>WIC 10850.4(a)</td>
<td>WIC 10850.4(c)-(d)</td>
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</tbody>
</table>
| If there is a **reasonable suspicion** that child abuse/neglect caused the fatality, release:  
  • The age and gender of the child  
  • The date of death  
  • Whether child resided in foster care or in parent/guardian’s home  
  • CWS or law enforcement investigation |
| Custodian of records releases redacted copies* of the following:  
  • Previous referrals of abuse or neglect  
  • ER referral information form and ER notice of referral disposition form  
  • Cross reports  
  • Risk and safety assessments  
  • Health care records, except mental health  
  • Police reports about the perpetrator  
  For cases while the child’s death occurred while the child was in foster care:  
  • Foster placement’s or resource family’s initial licensing/approval and renewals and type of license  
  • Reported licensing violations  
  • Records of the foster parent’s training |
| If CWS or LE makes a **determination** that child abuse/neglect caused a near fatality, release:  
  • The age and gender of the child  
  • The date of the near fatality  
  • Whether child resided in foster care or in parent/guardian’s home  
  • CWS or law enforcement investigation |
| **Within 20 Fatalities:**  
  **20 business days**  
  WIC 10850.4(c)(2)(F) |
| Custodian of records releases a description of child protective or other services provided and actions taken by the child welfare agency and juvenile court, not otherwise disclosed within other documents required for release. |
| County submits to the CDSS for review a written report including the cause and circumstances surrounding the near fatality and a description of services provided and actions taken by the county child welfare agency and juvenile court. The CDSS will notify the county of any of any discrepancies or other concerns. |
| **Within 30 calendar days**  
  WIC 10850.45(c)-(d) |
| The custodian of records releases redacted copies* of the following:  
  • Previous referrals of abuse or neglect  
  • ER referral information form and ER notice of referral disposition form  
  • Cross reports  
  • Risk and safety assessments  
  • Police reports about the perpetrator  
  • The CDSS-reviewed written report, including the description of services provided and actions taken  
  For cases while the child’s near fatality occurred while the child was in foster care:  
  • Foster placement’s or resource family’s initial licensing/approval and renewals, and type of license  
  • Reported licensing violations  
  • Records of the foster parent’s training |
| **REDATIONS**  
  Fatalities:  
  WIC 10850.4(e)  
  Near Fatalities:  
  WIC 10850.45(e) |
| • Identifying information  
  • Information that would jeopardize a criminal investigation, after consultation with the DA  
  • Any information that is privileged, confidential or not subject to disclosure under other laws |
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  • Information that would jeopardize a criminal investigation, after consultation with the DA  
  • Any information that is privileged, confidential or not subject to disclosure under other laws  
  • Health care records  
  • Any information not relevant to the near fatality, consistent with CDSS regulations and instructions. |

* Custodian of records is not required to obtain any documents not already in the child’s case file.
## Timeline – Child Fatality and Near Fatality Disclosure Requirements

<table>
<thead>
<tr>
<th>Requirements Prior to 9/13/16</th>
<th>Requirements 9/13/16-12/31/16</th>
<th>Requirements 1/1/17 and onward</th>
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<tbody>
<tr>
<td><strong>Fatalities</strong></td>
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<tr>
<td><strong>Definition</strong></td>
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<td>Severe childhood injury or condition caused by abuse or neglect which results in the child receiving critical care for at least 24 hours following the child’s admission to a critical care unit(s).</td>
<td>For child near fatalities that occur prior to 1/1/17: Severe childhood injury or condition caused by abuse or neglect which results in the child receiving critical care for at least 24 hours following the child’s admission to a critical care unit(s).</td>
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**CDSS Children’s Services Operations Bureau**

**childfatality@dss.ca.gov**

**Oct 2016**
CHILD NEAR FATALITY
COUNTY REPORT OF SERVICES PROVIDED AND ACTIONS TAKEN

INSTRUCTIONS:
This form shall be utilized to disclose information pursuant to Welfare and Institutions Code 10850.45(c) regarding a child near fatality, upon request of a member of the public. This form shall be submitted to the California Department of Social Services (COSS) within twenty calendar days of a public request for information or the disposition of the investigation, whichever is later. Please note that this form does not replace the SOC 826, which shall be submitted to the COSS for any child fatality or near fatality determined to be the result of abuse and/or neglect.

Please upload this form to the documents file in the Child Welfare Services/Case Management System (CWS/CMS) referral number indicated below. Please immediately email the COSS at CIReporting@dss.ca.gov with the incident referral number to inform the COSS of a new SOC 826A submission.

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COUNTY CONTACT AND PHONE NUMBER (INDIVIDUAL WHOM THE COSS WOULD CONTACT FOR ADDITIONAL INFORMATION):

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COUNTY WHERE INCIDENT OCCURRED: REPORTING COUNTY (IF DIFFERENT):

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CHILD'S GENDER:

- Male
- Female

CHILD'S AGE

DATE OF ABUSE/NEGLECT THAT RESULTED IN A NEAR FATALITY

DATE PHYSICIAN CERTIFIED CHILD TO BE IN CRITICAL OR SERIOUS CONDITION

RESIDENCE OF THE CHILD AT THE TIME OF THE ABUSE/NEGLECT THAT RESULTED IN THE NEAR FATALITY:

- Home of Parent/Legal Guardian
- Foster Care/Out-of-Home Care

INVESTIGATION CONDUCTED BY (CHECK ALL THAT APPLY):

- Law Enforcement
- GWS/Probation

Cause of Near Fatality (i.e., blunt force trauma, near drowning, hyperthermia):

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Circumstances Surrounding Near Fatality:
REPORTS RECEIVED

Reports Received shall include all prior reports regarding suspected or substantiated abuse and/or neglect of the near-fatality victim, and any reports of suspected or substantiated abuse and/or neglect of other children that is related to the abuse and/or neglect that led to the near-fatality.

Provide one report for each individual referral.

<table>
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<th>DATE OF REPORT:</th>
<th>INVESTIGATION DATE:</th>
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DESCRIPTION OF REPORT:

DATES AND DESCRIPTIONS OF SERVICES PROVIDED AND ACTIONS TAKEN:

DISPOSITION(S):

SOCIAL WORKER COMMENTS: