

REPORT OF CHILD ABUSE WITH FATALITY OR NEAR FATALITY

Purpose: To disseminate only that information which can be legally disseminated.

Legal reference: Iowa Code 235A.15, subsection 2, paragraph f.

Name of child (victim):	DOB of child:
Condition of child:	Diagnosis of child and name of physician making diagnosis:
Names of parents:	Name of alleged person responsible:
Current location of child:	Name of child protection worker (not for release): Phone: Fax: E-mail:
Status of assessment/investigation report: <input type="checkbox"/> The Department has no record of the person named being a subject in a child abuse fatality or near fatality report. <input type="checkbox"/> Assessment was completed on . Incident # . <input type="checkbox"/> Assessment IS NOT completed. Report is due on . Incident # .	Status of criminal investigation: <input type="checkbox"/> The Department has no information of any contact with Law Enforcement regarding the named person's involvement in a child abuse fatality or near fatality report. <input type="checkbox"/> Law Enforcement has been notified but to our knowledge has not yet initiated investigation. <input type="checkbox"/> Law Enforcement currently conducting joint investigation with DHS.
<input type="checkbox"/> THIS INFORMATION IS READY FOR RELEASE. Bureau Chief/Designee Signature:	

RESPONSE:

- The Department has no founded child abuse information regarding the named person's involvement in a child abuse or near fatality report.
- The Department received a report of child abuse regarding . The report was accepted on . The assessment was completed on . The child abuse report confirmed that was . The report concluded as being responsible for the abuse.

In addition, the Department has recommended:

Juvenile Court Involvement

Criminal Court Involvement

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