



Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 08/09/2014 11:51 AM [REDACTED]
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 08/09/2014

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 08/09/2014 05:51 PM
First Team Leader Assigned: [REDACTED] Date/Time 08/09/2014 12:00 AM
First Case Manager [REDACTED] Date/Time 08/09/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
			CSEM ?		
[REDACTED]	2 Yrs 2 Mos	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	None

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]

Referent Address:

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: None

Narrative: The child is not in state custody.

TFACTS:

Family Case ID's: [REDACTED] & [REDACTED]

Open Non-Custodial Services/Relative Caregiver Services ([REDACTED]) 4-16-2014. [REDACTED]

Closed Court Custody Yes 3-19-2008 Child's name [REDACTED]

Open CPS - No

Substantiated 5-9-2014 - Case ID # [REDACTED] - DEI [REDACTED]



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Death None found

Screened out 3

History (not listed above):

5-9-2014 Case ID # [REDACTED] DEC - Unsubstantiated

1-5-2012 Case ID # [REDACTED] DEC- Services Recommended and Accepted

5-18-2012 - Case ID # [REDACTED] DEC, ABN Unsubstantiated

5-10-2010 Case ID # [REDACTED] DEI Services Recommended and Accepted

Note: Other history was found for the mother as an alleged victim when she was a juvenile.

County: [REDACTED]

Notification: None

School/ Daycare: Unknown

Native American Descent: Unknown

Directions: [REDACTED]

Reporter's name/relationship: [REDACTED]

Reporter states:

The child is not in state custody.

[REDACTED] (age 3 months) resides with his [REDACTED] It is unknown if there are any other children in the home.

Today 08-09-2014 around 11:40 A.M. [REDACTED] mother contacted Law Enforcement about the infant being found unresponsive. It is unknown if the infant was breathing. No further details were provided about how the child became unresponsive. The infant was taken to the [REDACTED] in [REDACTED] [REDACTED]. The referent is not disclosing the child's condition at this time as they report they are not able to disclose this information over the phone due to confidentiality concerns.

The infant was reportedly in the care of a juvenile babysitter, [REDACTED] age 15, at some point today. No further information was provided about this.

The infant is presently at the [REDACTED] [REDACTED] in [REDACTED] [REDACTED]. Law Enforcement is requesting immediate contact as they need immediate DCS involvement. They would like the DCS case worker to contact the [REDACTED] [REDACTED] [REDACTED] at [REDACTED].

The referent refused to provide the infant's current condition. It is unknown if the infant was breathing when the infant was found. All of this is unknown due to the referent's refusal to provide it.

No known special needs/disabilities at this time.

Any other safety concerns worker who may respond: None

Per SDM: Investigative Track, P1-[REDACTED] 08/9/2014 @12:35pm

[REDACTED] notified at 12:42 P.M.

Update from County: Contact from [REDACTED] [REDACTED] at 1:00 P.M. reported that [REDACTED] [REDACTED] spoke with Law Enforcement and discovered that the infant is deceased. No other information is known at this time. [REDACTED] [REDACTED] is responding.



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Email notification sent to

[REDACTED]

[REDACTED] notification group.



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: Black/African

Age: 2 Yrs 2 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

None

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: CELL

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 26 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Name: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 17 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**Tennessee Department of Children's Services
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral**

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 08/09/2014

Assignment Date: 06/25/2015

Street Address [REDACTED]

City/State/Zip [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN		CSEM	
1	[REDACTED]	[REDACTED]	Neglect Death	Unknown Participant [REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 02/27/2015

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: No Services needed.

D. Case Workers

Case Worker [REDACTED]

Date: 02/27/2015

Team Leader: [REDACTED]

Date: 03/02/2015

E. Investigation Summary

Instruction: Condense the finding rationale for each allegation relative to the child victim(s). Be sure to identify the facts that provided for the classification decision.

Summarize the key points and dates of the child or children's statements and/or the observation of the child or children's physical state or home environment:

The child is deceased.

Summarize professional, medical or psychological findings or opinions: What is the collateral's oral or written finding/opinion of the incident(s)/allegation(s)?

[REDACTED] said that [REDACTED] was mad at her for taking her to court for child support for [REDACTED]. [REDACTED] said [REDACTED] did not show up for court and there is a warrant out for her arrest according to what the court worker told [REDACTED]. [REDACTED] said [REDACTED] doesn't have a phone anymore and [REDACTED] can not contact her on facebook as [REDACTED] has deleted her as a friend. [REDACTED] stated that she did not know about a babysitter. She said [REDACTED] had been living with her up until about a year ago. [REDACTED] and the baby stayed with [REDACTED] at her house for about a month and then [REDACTED] and the baby would come on and off for a week or weekend. [REDACTED] thought [REDACTED] always had [REDACTED] as far as [REDACTED] knew. [REDACTED] stated she and [REDACTED] went to [REDACTED] from July 27th- August 2nd and [REDACTED] told [REDACTED] that [REDACTED] locked her in a room at night and told her if she was to come out then a monster would get her. [REDACTED] told [REDACTED] that [REDACTED] will let a car run her over and [REDACTED].



Tennessee Department of Children's Services
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

Case Name [REDACTED]

Investigation ID: [REDACTED]

reported that [REDACTED] whooped her with a stick and [REDACTED] took [REDACTED] to and from the park. [REDACTED] reports that [REDACTED] is fearful of [REDACTED]

Summarize alleged perpetrator's statement or admission: What is the perpetrator's explanation of the incident(s)/allegation(s)?

Mom then text her and asked was [REDACTED] awake at 11:14 am and [REDACTED] said [REDACTED] was still asleep. At 11:36 am the phone call comes in from [REDACTED] and [REDACTED] said she was up and then said the baby was still asleep. And mom said she will be there in 20-30 minutes. At 11:36 babysitter said she had to hurry up and [REDACTED] said why what's wrong and she said I don't know just hurry. Then [REDACTED] was pulling up 2-3 minutes later. Mom said at 11:30 pm she told [REDACTED] to leave the door unlocked and since he was going to come back and get him. Mom said she would be back to get him and she would let them know when she was going to get the baby. They always leave the door unlocked. [REDACTED] said I don't know how you're going to get in and I'm just going to kidnap the baby. She said [REDACTED] knew what the business was and [REDACTED] paid her and everything to keep [REDACTED] said she is always there. [REDACTED] said [REDACTED] had on a onzie with a dog or bear. She said he was laid on his side in the middle of the bed and the pillows were laid around him. The blanket was up to his shoulders. She said he was always on his stomach and he can hold his head up. [REDACTED] said he was born 3 weeks premature at 37 weeks pregnant and [REDACTED] had an emergency C-Section. [REDACTED] was born at [REDACTED] [REDACTED] and his doctor is [REDACTED] [REDACTED]. He had his shots at 2 months but there is not a follow up appointment scheduled. [REDACTED] does not have seizures, illnesses, and medication.

Summarize witnesses' descriptions of what they saw and what they believe indicates child abuse/neglect:

[REDACTED] (age 3 months) resides with his mother, [REDACTED]. It is unknown if there are any other children in the home.

Today 08-09-2014 around 11:40 A.M. [REDACTED] mother contacted Law Enforcement about the infant being found unresponsive. It is unknown if the infant was breathing. No further details were provided about how the child became unresponsive. The infant was taken to the [REDACTED] [REDACTED] in [REDACTED] [REDACTED]. The referent is not disclosing the child's condition at this time as they report they are not able to disclose this information over the phone due to confidentiality concerns.

The infant was reportedly in the care of a juvenile babysitter, [REDACTED] age 15, at some point today. No further information was provided about this.

The infant is presently at the [REDACTED] [REDACTED] in [REDACTED] [REDACTED]. Law Enforcement is requesting immediate contact as they need immediate DCS involvement. They would like the DCS case worker to contact the [REDACTED] [REDACTED] at [REDACTED] at [REDACTED].

The referent refused to provide the infant's current condition. It is unknown if the infant was breathing when the infant was found. All of this is unknown due to the referent's refusal to provide it.

No known special needs/disabilities at this time.

Summarize any other evidence or factors that support the investigative finding(s) for the allegation(s) of abuse/neglect:

This case was presented to the [REDACTED] [REDACTED] Child Protective Investigative Team on 2-4-15. All required CPIT members were present. A recommendation was made to unsubstantiated the allegations, and the CPIT members did agree. The hard copy of the CPIT form was signed and that hard copy is located in the case file. There is no proof to state that [REDACTED] died from anything but natural causes. The case will be closed and classified as Allegation Unsubstantiated/ Perpetrator Unsubstantiated for the allegation of Child Neglect Death.

Distribution Copies:



Tennessee Department of Children's Services
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

Case Name : [REDACTED]

Investigation ID: [REDACTED]

Juvenile Court in All Cases
District Attorney in Severe Child Abuse Cases
Regional Supervising Attorney



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 08/04/2015 Contact Method:

Contact Time: 04:00 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Created Date: 08/04/2015

Completed date: 08/04/2015 Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/04/2015 03:21 PM Entered By: [REDACTED]

The medical records for [REDACTED] were scanned into the family case of TFACTS under the document section.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/10/2015 11:05 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/10/2015 11:05 AM Entered By: [REDACTED]
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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
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 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
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Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
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Purpose(s):	Safety - Child/Community		
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Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/10/2015 11:05 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
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Purpose(s):	Safety - Child/Community		
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Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/10/2015 11:05 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
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Case Recording Details

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Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
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Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Children Concerning**Participant(s)****Narrative Details**

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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/30/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/10/2015
Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Entered By:	[REDACTED]	Recorded For:	[REDACTED]
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Completed date:	08/10/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/10/2015 11:05 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/30/2015

Contact Method:

Contact Time: 02:05 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location:

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/10/2015 11:05 AM Entered By: [REDACTED]

This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/30/2015

Contact Method:

Contact Time: 11:49 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/30/2015

Completed date: 07/30/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/30/2015 10:54 AM Entered By: [REDACTED]

This investigation was placed on the Log for to begin the approval process on 03-18-2015.

At that time there was no reported safety concerns expressed by [REDACTED] or any Needs expressed by the family.

All other Task and visits were waived at that time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 07/30/2015

Contact Method:

Contact Time:

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/31/2015

Completed date: 07/31/2015

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/31/2015 10:30 AM Entered By: [REDACTED]

BACKGROUND CHECKS

Internet Check [REDACTED] searched the Tennessee Health Abuse Registry, Tennessee Bureau of Investigation Meth Offender Registry, Tennessee Felony Offender Registry and National Sex Offender Registry databases regarding [REDACTED] and found nothing. A copy of such finding is contained within the hard file.

JIMS Background Check Results: The results are:

Nothing found for [REDACTED]

2-3-15- Conviction of driving while privilege suspended, conviction of simple possession 11-19-14 conviction of simple possession and 5-13-11 conviction of theft by shoplifting \$500 or less.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/27/2015 Contact Method:
 Contact Time: 02:46 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 02/03/2015
 Completed date: 02/27/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Case Summary
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 02/03/2015 05:36 PM Entered By: [REDACTED]

The Department of Children's Services received a report on 8-9-14 for Neglect Death of [REDACTED] mother contacted Law Enforcement about the infant being found unresponsive. It was not known if the infant was breathing. No further details were provided about how the child became unresponsive. [REDACTED] with [REDACTED] worked this case. The alleged perpetrator is listed as an unknown. The infant was taken to the [REDACTED] in [REDACTED] [REDACTED] was transported to [REDACTED] where he was pronounced dead at 1223 hours on August 9th, 2014. The infant was reportedly in the care of a juvenile babysitter at the time the child was found unresponsive at the babysitter's home.

There has been one prior report made to Department of Children's Services where [REDACTED] was listed as an alleged child victim. [REDACTED] was listed as the alleged perpetrator. The case was closed on 6-25-14 as Allegation Substantiated/Perpetrator Substantiated as the notes read "Cord Blood tissue was positive for THC. The mother and baby were both positive for THC at the time of birth."

In this report the alleged perpetrator is listed as an unknown. Interviews were completed with the babysitter, mother, [REDACTED] and two adult men who were in the home during the time the babysitter was babysitting.

Interview with the Babysitter occurred and she said that on August 9th, 2014 she babysat [REDACTED]. She had [REDACTED] since the night before. According to the babysitter, [REDACTED] told her to leave the door unlocked and she would be back for him. The babysitter had never watched [REDACTED] overnight but had babysat him in the past. The baby sitter said [REDACTED] put the baby to bed before she left and she had checked on him later in the night. She said [REDACTED] had laid two pillows around [REDACTED] and then laid him face down on the third pillow. The babysitter said she didn't take [REDACTED] to bed with her but that she normally does. The babysitter slept through the night not realizing [REDACTED] had not been picked up. [REDACTED] was found the same way his mom had put him to bed the night before but now he was not responsive. The babysitter said she called [REDACTED] when the baby was found and she said she would be there in about 15 minutes. According to the babysitter once the mother got there then that is when [REDACTED] picked up the baby.

Interview with [REDACTED] birth mother, and she reported she did tell the babysitter that she would pick up [REDACTED] the same night and he wouldn't be spending the night away. [REDACTED] said she (babysitter) knew to take him to bed



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

when she went to bed. [REDACTED] did say that she left around 9 pm and then come back about 11 pm and left again. She said she had no intention of leaving [REDACTED] at the babysitters all night. She said she called the babysitter the next morning and woke her up and then the babysitter went in to check on [REDACTED]. The babysitter called about 10 or 15 minutes later letting [REDACTED] that something was wrong. [REDACTED] said that she would be there as soon as she could.

One of the men that was at the family home of the babysitter, was [REDACTED] and he said, the mom and the baby was there all day and the mom was doing other people's hair. She left about 9 pm and she come back in about 11 pm and she said go ahead and leave the door unlocked because she was coming back. [REDACTED] usually has a key and used it to come in. Normally they don't leave the door unlocked. [REDACTED] got up smoked a cigarette, took a shower and made eggs. Then he heard the babysitter hollering [REDACTED] and he didn't know the baby's name so he thought she was hollering [REDACTED]. That was about 11-11:15 am. He touched the baby and the baby was cold. [REDACTED] said the mother had come to the house and she was the one that brings the baby down the stairs.

The other person that was interviewed was [REDACTED] and he said he got there about 10-10:30 pm last night and the baby had already been put to bed. [REDACTED] was the only one that was awake. He left because he thought mom had come and got the baby. Usually when the babysitter is babysitting she wakes him up making the bottle but that she hadn't gotten up in the night to get a bottle. He had no idea the baby was still at the home when he woke up.

Department of Children's Services defines CHILD DEATH/ NEAR DEATH as:

1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
2. Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child deaths are always treated as severe child abuse.
3. Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.
4. Near Death - A serious or critical medical condition resulting from child abuse or child sexual abuse, as reported by a physician who has examined the child subsequent to the abuse.

The evidence of the case is the final autopsy that states that [REDACTED] died of cardiac arrhythmia due to cardiac rhabdomyomas and his death was ruled as natural.

This case was presented to the [REDACTED] Child Protective Investigative Team on 2-4-15. All required CPIT members were present. A recommendation was made to unsubstantiate the allegations, and the CPIT members did agree. The hard copy of the CPIT form was signed and that hard copy is located in the case file. There is no proof to state that [REDACTED] died from anything but natural causes. The case will be closed and classified as Allegation Unsubstantiated/ Perpetrator Unsubstantiated for the allegation of Child Neglect Death.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/26/2015 Contact Method: Face To Face
 Contact Time: 06:30 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 02/27/2015
 Completed date: 02/27/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Other Child Living in the Home Interview/Observation,Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/27/2015 01:45 PM Entered By: [REDACTED]

[REDACTED] went to [REDACTED] home to meet with her and [REDACTED] were outside sledding when CPSI arrived and then went in to talk to CPSI. [REDACTED] was clean and dressed appropriately while outside sledding and then went inside to change into appropriate dry clothes.

[REDACTED] said that [REDACTED] was mad at her for taking her to court for child support. [REDACTED] said [REDACTED] did not show up for court and there is a warrant out for her arrest according to what the court worker told [REDACTED] said [REDACTED] doesn't have a phone anymore and [REDACTED] can not contact her on facebook as [REDACTED] has deleted her as a friend.

They have plenty of food. The 2 bedroom 1 bath home is clean and appropriate. CPSI left the family a copy of the resource guide for [REDACTED] and [REDACTED] asked CPSI to also email it to her at [REDACTED] [REDACTED] wants to know if there are any grandparents rights for her in [REDACTED] [REDACTED] said that [REDACTED] will be 5 in May and they will loose their WIC at that time. She said WIC is very helpful for her.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	02/26/2015	Contact Method:	
Contact Time:	11:38 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	02/26/2015
Completed date:	02/26/2015	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 02/26/2015 10:40 AM Entered By: [REDACTED]

[REDACTED] along with [REDACTED] discussed this case on this date.

[REDACTED] will complete a home visit prior to submitting this case for approval.

The child has a sibling that has not lived in the home with the birth mother for approximately 3 years and parents are paying child support to the grandmother.

At this time there are no additional concerns and the family has no specific needs at this time that would require intervention from the department.

Following the home visit the case will be submitted for approval.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	02/12/2015	Contact Method:	
Contact Time:	04:33 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	02/12/2015
Completed date:	02/12/2015	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 02/12/2015 03:36 PM Entered By: [REDACTED]

This case was presented to Child Protection Investigative Team on 02-11-2015
 All members agreed to the classification decision of Allegations Unsubstantiated and Perpetrator Unsubstantiated due to the final autopsy report reflecting that the child died of Natural causes.

The closing Death summary will be entered and submitted for review and closure.

All appropriate documents will be uploaded into Tfacts



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/02/2015 Contact Method:
 Contact Time: 10:00 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 02/02/2015
 Completed date: 02/25/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/02/2015 07:04 PM Entered By: [REDACTED]

[REDACTED] received a final autopsy from [REDACTED] for [REDACTED]. The autopsy read that [REDACTED] passed away from a cardiac arrhythmia due to cardiac rhabdomyomas. The manner is natural. The final autopsy will be scanned into the investigation portion and the hard copy will be in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/26/2015

Contact Method: Attempted Face To Face

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 02/26/2015

Completed date: 02/26/2015

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Other Child Living in the Home Interview/Observation,Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 02/26/2015 10:55 AM Entered By: [REDACTED]

There was a scheduled visit on this day but this appointment was rescheduled.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/13/2015 Contact Method: Phone Call
 Contact Time: 11:30 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 01/13/2015
 Completed date: 01/13/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/13/2015 10:35 AM Entered By: [REDACTED]

[REDACTED] called the medical examiner's office and talked to [REDACTED] and she said the autopsy is not completed yet.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/30/2014

Contact Method: Attempted Face To Face

Contact Time: 12:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 02/26/2015

Completed date: 02/26/2015

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Other Child Living in the Home Interview/Observation,Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 02/26/2015 10:49 AM Entered By: [REDACTED]

[REDACTED] had a scheduled appointment that was scheduled for this date and time. [REDACTED] called to say that [REDACTED] had strep throat and sick.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/09/2014

Contact Method: Phone Call

Contact Time: 10:47 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/09/2014

Completed date: 12/09/2014

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/09/2014 09:48 AM Entered By: [REDACTED]

[REDACTED] called the medical examiner's office and talked to [REDACTED] said the autopsy is not completed yet.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 12/03/2014 Contact Method: Phone Call
 Contact Time: 01:25 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 12/03/2014
 Completed date: 12/03/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/03/2014 12:26 PM Entered By: [REDACTED]
 [REDACTED] talked to [REDACTED] at the medical examiner's office about the autopsy and it's not been completed as of yet.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 11/25/2014 Contact Method: Phone Call
 Contact Time: 08:30 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 11/25/2014
 Completed date: 11/25/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 11/25/2014 07:31 AM Entered By: [REDACTED]

[REDACTED] called the medical examiners office for the autopsy for [REDACTED] and they said it was not ready.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 10/28/2014 Contact Method: Face To Face
 Contact Time: 07:00 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 12/01/2014
 Completed date: 12/01/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/01/2014 07:42 AM Entered By: [REDACTED]

10-28-14 @ 7 pm. [REDACTED] went to [REDACTED] to see [REDACTED]. [REDACTED] talked with [REDACTED] and she said it would mess [REDACTED] up if she went to live with [REDACTED] at this time since [REDACTED] has had [REDACTED] for 3 years now. [REDACTED] goes to school in [REDACTED] from 8 am-1:45 pm at [REDACTED] for a pre head start program through [REDACTED]. The phone number is [REDACTED]. [REDACTED] is [REDACTED] teacher.

[REDACTED] said [REDACTED] come in and out but only visits. [REDACTED] has gone to court for child support and [REDACTED] has to pay \$125 a month since she doesn't have a job. [REDACTED] said she is not working and she gets a disability for her back and it's \$718/month. She said [REDACTED] is on TNCare. She gets families first of \$140. And \$150 in food stamps a month. [REDACTED] pays \$190 in rent, \$55-110 for electric, car payment of \$117, Insurance for the car is \$320 every 6 months, cable is \$60 and phone is \$55.

[REDACTED] said [REDACTED] is on Albuteral breathing treatments and it makes her more hyper and she takes it every 6 hours. She said [REDACTED] takes singular every night. [REDACTED] had a hernia as a baby and that is why [REDACTED] belly button looks different. [REDACTED] said [REDACTED] has been to her house three times since the Department has been involved. [REDACTED] said [REDACTED] come out once in the middle of the night to peek in and then left. [REDACTED] doesn't have a car and she gets rides from friends.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/16/2014

Contact Method: Phone Call

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/16/2014

Completed date: 10/16/2014

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/16/2014 09:12 AM Entered By: [REDACTED]

[REDACTED] called the medical examiner's office and they said the toxicology has come back but they are waiting on it to be written.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/26/2014 Contact Method:
 Contact Time: 03:30 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/28/2014
 Completed date: 09/28/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 09/28/2014 06:31 AM Entered By: [REDACTED]

ADMINISTRATIVE REVIEW/ CASE STAFFING -

This case was staffed on this date between [REDACTED] [REDACTED] [REDACTED] [REDACTED] This case came to the Department's attention on 08/09/14 with allegations of neglect death by an unknown perpetrator against the child [REDACTED] [REDACTED]. The referral states that today 08-09-2014 around 11:40 a.m. [REDACTED] mother contacted Law Enforcement about the infant being found unresponsive. It is unknown if the infant was breathing. No further details were provided about how the child became unresponsive. The infant was taken to the [REDACTED] [REDACTED] in [REDACTED] [REDACTED]. The referent is not disclosing the child's condition at this time as they report they are not able to disclose this information over the phone due to confidentiality concerns. The infant was reportedly in the care of a juvenile babysitter, [REDACTED] age 15, at some point today. No further information was provided about this.

Investigator follow-up:

The babysitter stated she is the one who found the baby unresponsive. The birth mother had told the babysitter that she (mother) was going to pick up the child during the night, but she did not actually show up to pick up the child. The 15 year old babysitter went to bed and left the baby the way the mother had laid the baby down, face down on a pillow on the bed. The babysitter woke up the next morning and did not realize the birth mother never showed up until the birth mother texted/called her asking about the baby. That's when the baby was discovered. Mother never gave a statement as to why she never showed up to get her baby that night or why she never called back to say she wasn't coming. The mother reported the babysitter usually takes the baby to bed with her, but that the babysitter "forgot" that night and left the baby on pillow face down. The mother is saying she didn't leave the baby face down on the pillow, she placed the pillows around the baby. The mother's story and the babysitter's story don't match. The preliminary autopsy is back and states we are still waiting on the toxicology reports. The mother did test for marijuana.

There is another sibling who does not live in the home. That sibling is a 4 year old female who lives with the maternal grandmother in [REDACTED] [REDACTED]. The grandmother is saying she has had that child since it was an infant. However, she does not have legal custody; she only has a power of attorney. The mother does go see the child but has not brought the child back to [REDACTED] [REDACTED]. This case was staffed with [REDACTED] [REDACTED] [REDACTED] [REDACTED] and they did not feel at that time there was enough evidence to file anything in court.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Next Steps:

The case will be staffed with [REDACTED] to see if the surviving sibling in [REDACTED] must be seen every month, since that child does not live with the birth mother. The case will be restaffed monthly until the final autopsy comes back, and the closing child fatality summary will be completed and entered into TFACTS.

Narrative Type: Addendum 1 Entry Date/Time: 09/28/2014 06:36 AM Entered By: [REDACTED]

An email was sent on this date by [REDACTED] to [REDACTED] to ask whether or not the surviving sibling who resides with the grandmother in [REDACTED] needs to be seen monthly until this case is closed. Case manager [REDACTED] was also copied on that email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/23/2014 Contact Method: Phone Call
 Contact Time: 08:45 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/23/2014
 Completed date: 09/23/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/23/2014 07:46 AM Entered By: [REDACTED]

[REDACTED] called [REDACTED] and she said she got papers signed by a power of attorney and she can get her any service she needs. They have a court date on October 7th at 9 am for child support because she was taking mom and dad. [REDACTED] said she went to court and talked to someone and they said their is nothing that she can do. That is in [REDACTED] [REDACTED] said everything is going great. [REDACTED] has not been with her mom at all since the incident unless [REDACTED] comes to see [REDACTED] [REDACTED] has not tried to come and pick up [REDACTED] They have no needs at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: System Completed
 Contact Date: 08/09/2014 Contact Method: Face To Face
 Contact Time: 03:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 08/19/2014
 Completed date: 09/09/2014 Completed By: System Completed
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/19/2014 09:51 AM Entered By: [REDACTED]

[REDACTED] went to the family home to talk to [REDACTED] at [REDACTED] and her phone number is [REDACTED]. [REDACTED] stated that she did not know about a babysitter. She said [REDACTED] had been living with her up until about a year ago. [REDACTED] and the baby stayed with [REDACTED] at her house for about a month and then [REDACTED] and the baby would come on and off for a week or weekend. [REDACTED] thought [REDACTED] always had [REDACTED] as far as [REDACTED] knew. [REDACTED] stated she and [REDACTED] went to [REDACTED] from July 27th- August 2nd and [REDACTED] told [REDACTED] that [REDACTED] locked her in a room at night and told her if she was to come out then a monster would get her. [REDACTED] told [REDACTED] that [REDACTED] will let a car run her over and [REDACTED] reported that [REDACTED] whooped her with a stick and [REDACTED] took [REDACTED] to and from the park. [REDACTED] reports that [REDACTED] is fearful of [REDACTED]. [REDACTED] said she has [REDACTED] go to the doctor every time with [REDACTED] was last with [REDACTED] on July 7th-16th at [REDACTED] house. [REDACTED] talked to [REDACTED] in private in her room. [REDACTED] said adults call her mom [REDACTED] "Mommy" [REDACTED] said she doesn't like [REDACTED] because she is not nice and whoops her with [REDACTED] hand on [REDACTED] legs. She said she likes living her with her mom. [REDACTED] said [REDACTED] and her mom buy cigarettes at a store and [REDACTED] smell the same as her mom's. [REDACTED] said she is not afraid of anyone or anything. [REDACTED] said she does not need anything. The home was clean and appropriate with no safety concerns. [REDACTED] had her own room and so did [REDACTED]. The apartment was a 2 bedroom 1 bath with plenty of food in the cabinets, fried and freezer. [REDACTED] was clean and dressed appropriate for the weather.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/09/2014 Contact Method: Face To Face
 Contact Time: 01:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 08/19/2014
 Completed date: 08/19/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/19/2014 09:30 AM Entered By: [REDACTED]

[REDACTED] talked to [REDACTED] with [REDACTED] and major crimes in a private room with [REDACTED] mother present. [REDACTED] said her son is [REDACTED] [REDACTED] is [REDACTED] doctor and he has had his shots. His four month checkup has not been scheduled. She went to 37 weeks pregnant. She had a C-section because she had one with her daughter. He was 5lbs. 15 oz.

[REDACTED] said she went out to further west [REDACTED] to a friend's house and she got home around 8 am. [REDACTED] said she seen him at midnight last night and she fed him and gave him his bath and he ate a full 8 oz. with a little bit of oatmeal cereal. He has been on the oatmeal cereal since he was born to help him sleep through the night and keeps his full. He normally wakes up between 3 am and 6 am. [REDACTED] put him upstairs in a bed and [REDACTED] was supposed to get him to take him to bed with her. [REDACTED] said she knew that she was keeping him for the night. [REDACTED] said she told [REDACTED] that she would let her know when she was coming back and they kept in contact through text messages and phone calls. [REDACTED] said she called and [REDACTED] said he was still sleeping and [REDACTED] was getting ready to go to bed at 12:20 when they last text. [REDACTED] said she was hungry. There were no other conversations. Then 9:01 am [REDACTED] said he checked on the baby and he was still asleep. [REDACTED] text her saying he was in front of [REDACTED] house at [REDACTED]. Mom then text her and asked was [REDACTED] awake at 11:14 am and [REDACTED] said [REDACTED] was still asleep. At 11:36 am the phone call comes in from [REDACTED] and [REDACTED] said she was up and then said the baby was still asleep. And mom said she will be there in 20-30 minutes. At 11:36 babysitter said she had to hurry up and [REDACTED] said why what's wrong and she said I don't know just hurry. Then [REDACTED] was pulling up 2-3 minutes later. Mom said at 11:30 pm she told [REDACTED] to leave the door unlocked and since he was going to come back and get him. Mom said she would be back to get him and she would let them know when she was going to get the baby. They always leave the door unlocked. [REDACTED] said I don't know how you're going to get in and I'm just going to kidnap the baby. She said [REDACTED] knew what the business was and [REDACTED] paid her and everything to keep [REDACTED]. [REDACTED] said she is always there. [REDACTED] said [REDACTED] had on a onzie with a dog or bear. She said he was laid on his side in the middle of the bed and the pillows were laid around him. The blanket was up to his shoulders. She said he was always on his stomach and he can hold his head up.

[REDACTED] said he was born 3 weeks premature at 37 weeks pregnant and [REDACTED] had an emergency C-Section. [REDACTED] was born at [REDACTED] and his doctor is [REDACTED]. He had his shots at 2 months but there is not a follow up appointment scheduled. [REDACTED] does not have seizures, illnesses, and medication.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] is not on medications, has not had domestic violence and no mental illness. She does not work and she graduated from [REDACTED] [REDACTED] said she has had ecoli for two weeks and kidney stones during her pregnancy and she fell down a flight of stairs when she was 31-32 weeks pregnant. [REDACTED] found out at 4-5 weeks that she was pregnant. Her [REDACTED] was [REDACTED] in [REDACTED] [REDACTED] sleeps in a play pen. [REDACTED] was on Soy Gerber good start because the regular formula he was spitting up and when he was born they started putting a teaspoon of cereal in his bottles. [REDACTED] said she last fed him at midnight about an 8 oz bottle with very little cereal. [REDACTED] said she had a miscarriage before her older daughter, [REDACTED] who is 4 years old and lives with [REDACTED] mom but has custody and it's easier for [REDACTED] for [REDACTED] to live there. [REDACTED] said she has lived in her apartment since February.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2014

Contact Method: Face To Face

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 02/04/2015

Completed date: 02/04/2015

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 02/04/2015 11:00 AM Entered By: [REDACTED]

The child [REDACTED], was not seen by [REDACTED] due to him being deceased. He was seen by [REDACTED] [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/09/2014 Contact Method: Correspondence
 Contact Time: 10:00 AM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 08/19/2014
 Completed date: 08/19/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/19/2014 09:28 AM Entered By: [REDACTED]

[REDACTED] with the [REDACTED] gave [REDACTED] the CD of the interviews and it was dictated from the CD by [REDACTED]

COLLATERAL CONTACT

[REDACTED] He came there about 5-5:30 because he got kicked out of his house. His mom kicked him out because she sold the house. He did laundry and he is trying to go to [REDACTED]. The mom with the baby was here and she was doing hair. The mom was there before she left and the mom and the baby was there all day. She left about 9 pm and she come back in about 11 and she said go ahead and leave the door unlocked because she was coming back. [REDACTED] and [REDACTED] went back to work. Mom usually has a key to come in. Normally they don't leave the door unlocked. [REDACTED] come in and dropped the bag off about 10-10:30 am. [REDACTED] got up smoked a cigarette, took a shower and made eggs. Then he heard her hollering [REDACTED] and he didn't know the baby's name so he thought she was hollering [REDACTED]. That was about 11-11:15. He touched the baby and the baby was cold. Mom come downstairs holding the baby.

[REDACTED] He doesn't know what time the mom got there.

He got there about 10-10:30 pm last night and the baby had already been put to bed. [REDACTED] was the only one that was up. He was asleep. He left because he thought mom had come and got the baby. Usually when [REDACTED] is babysitting she wakes him up making the bottle. He had no idea the baby was still here.

[REDACTED] 15 years old at [REDACTED] in [REDACTED] grade.

She lives here and the zip is [REDACTED]. She babysits for [REDACTED] all the time. She last babysat him a couple days ago. In a 7 day period she babysits 1-2 times. [REDACTED] never stays the night and her mom said she was going to come back and get him. He got there about 10 pm. He was dressed in a navy blue or black or dark colored onzie. His mother fed him before she put him to bed and it was a regular bottle. He was put to bed in [REDACTED] mom's room. [REDACTED] put him on his stomach to his right. He always sleeps on his stomach. [REDACTED] left about 30 minutes to an hour later. [REDACTED] said she would come back and got him.

[REDACTED] goes and lays down with her door open. [REDACTED] called and said she was going to come and get the can opener to open this can about 12:00 and it was a little while after she left. She comes and opens the can and [REDACTED] said she would be back in a little while. [REDACTED] was down stairs. She was in her room and she fell asleep. [REDACTED] is her mom's best friend. [REDACTED] called and said go check to see if the baby is awake and [REDACTED] said I thought you already come and got him. [REDACTED] went and checked on him and he was still asleep and she pulled the covers back and he wasn't breathing and [REDACTED] tapped him a little shook him a



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

little and called him by his name. [REDACTED] called the mother [REDACTED] the mother, and said you need to get down here immediately and she thinks something is wrong. [REDACTED] gets down here. [REDACTED] called at 11:15 am to ask if the baby was ok. [REDACTED] called her back at 11:35 and said something is not right. [REDACTED] comes over here and [REDACTED] called 911 at 11:41. [REDACTED] said there was a big cover over the bed and she pulled it back him. It was too his back and his face was turned and could see a little of his ear. They got [REDACTED] permission to bring a baby in and show them how the baby was found. [REDACTED] said her mom did not sleep here last night and she was with the man that was fixing her car. Granny was in her room. [REDACTED] only moved the blanket. [REDACTED] said the red pillow wasn't there but [REDACTED] was lying on this Pillow. [REDACTED] demonstrated how she found the baby with the blanket. [REDACTED] said it was scary. [REDACTED] didn't normally spend the night usually but [REDACTED] would put him down to sleep several times before. She didn't notice any colors or liquids. She thinks the red stains on the mom's bed are from her mom's menstrual. The bottle that [REDACTED] fed him with is down stairs. [REDACTED] did leave formula for him when she left. There was a onzie that [REDACTED] was wiping [REDACTED] while she was feeding with. No one changed him, gave him a bath or cleaned him up. [REDACTED] has not actually spend the night. [REDACTED] or [REDACTED] was both here and if [REDACTED] didn't get the baby form [REDACTED] then they could have. [REDACTED] left a diaper bag when she left him here.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/09/2014 Contact Method:
 Contact Time: 09:15 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 07/31/2015
 Completed date: 07/31/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/31/2015 10:31 AM Entered By: [REDACTED]

BACKGROUND CHECKS

Internet Check - [REDACTED] searched the Tennessee Health Abuse Registry, Tennessee Bureau of Investigation Meth Offender Registry, Tennessee Felony Offender Registry and National Sex Offender Registry databases regarding [REDACTED] and [REDACTED] and found nothing. A copy of such finding is contained within the hard file.

JIMS Background Check Results: The results are:
 Nothing found for [REDACTED]

2-3-15- Conviction of driving while privilege suspended, conviction of simple possession 11-19-14 conviction of simple possession and 5-13-11 conviction of theft by shoplifting \$500 or less.

TFACTS History Search- [REDACTED] verified the family's history of involvement with DCS through a search of TFACTS. On this date the search noted the following history: HISTORY

5/8/14 P1 Investigation for drug exposed infant against [REDACTED] closed AS/PS for DEI [REDACTED] because Cord Blood tissue was positive for THC. The mother and baby were both positive for THC at the time of birth.

5/18/12 Investigation for drug exposed infant against [REDACTED] for DEI against [REDACTED] Case was closed as allegations unfounded / perpetrator unfounded for allegations of drug exposed child perpetrated by [REDACTED] against her daughter [REDACTED] as [REDACTED] could not be located to address allegations. However [REDACTED] is currently safe with her father and it was reported to [REDACTED] if no custody order exists and he has concerns about drug use by [REDACTED] [REDACTED] [REDACTED] did not have to allow the child to go with [REDACTED] [REDACTED]

1-3-15 P2 Assessment for drug exposed infant against [REDACTED] perpetrated by [REDACTED] Case was closed as Services Recommended and Accepted because [REDACTED] admitted to smoking and tested positive for THC.

5-8-10 P2 Assessment for drug exposed infant against [REDACTED] perpetrated by [REDACTED] The case was closed as services recommended and accepted. Although baby, [REDACTED] tested negative for marijuana, CM still made a referral to the [REDACTED] program so that they might be able to assess



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

further anything that the [REDACTED] family may need. CM also made a referral to TEIS due to DCS policy. The home and child were seen on at least 3 different occasions in which mother was appropriate with the baby. The home was appropriate as well.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/09/2014 Contact Method: Phone Call
 Contact Time: 09:10 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 07/31/2015
 Completed date: 07/31/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): CPIT (Child Protective Investigative Team)
 Contact Sub Type:

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/31/2015 10:29 AM Entered By: [REDACTED]

CPIT Convened

The Child Protective Investigative Team (CPIT) was convened on this date. Notification of the referral was sent to the [REDACTED] District Attorney's office [REDACTED] (if a sex abuse case), and to the appropriate law enforcement agency.

[REDACTED] [REDACTED] has been assigned to this case.

Next Steps: meet with the family



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2014

Contact Method: Attempted Phone Call

Contact Time: 09:05 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/31/2015

Completed date: 07/31/2015

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Referent Interview

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/31/2015 10:09 AM Entered By: [REDACTED]

REFERENT NOTIFICATION:

The referent was attempted to be contacted but was not able to be contacted.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/09/2014 Contact Method:
 Contact Time: 09:00 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 07/31/2015
 Completed date: 07/31/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Case Summary
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/31/2015 10:07 AM Entered By: [REDACTED]

BEGINNING CASE SUMMARY

This case came to the attention of the Department on 8-9-14 as a P1. The response is due on 8-10-14. This case was assigned to [REDACTED]. The allegations are neglect death. The alleged child victim(s) are listed as [REDACTED] and the alleged perpetrator(s) are listed as unknown.

The report states the following: 5-9-2014 Case ID # [REDACTED] DEC - Unsubstantiated

1-5-2012 Case ID # [REDACTED] DEC- Services Recommended and Accepted

5-18-2012 - Case ID # [REDACTED] DEC, ABN Unsubstantiated

5-10-2010 Case ID # [REDACTED] DEI Services Recommended and Accepted

Note: Other history was found for the mother as an alleged victim when she was a juvenile.

County: [REDACTED]

Notification: None

School/ Daycare: Unknown

Native American Descent: Unknown

Directions: [REDACTED]

Reporter states:

The child is not in state custody.

[REDACTED] (age 3 months) resides with his mother, [REDACTED]. It is unknown if there are any other children in the home.

Today 08-09-2014 around 11:40 A.M. [REDACTED] mother contacted Law Enforcement about the infant being found unresponsive. It is unknown if the infant was breathing. No further details were provided about how the child became unresponsive. The infant was taken to the [REDACTED] in [REDACTED]. The referent is not disclosing the child's condition at this time as they report they are not able to disclose this information over the phone due to confidentiality concerns.

The infant was reportedly in the care of a juvenile babysitter, [REDACTED] age 15, at some point today. No further information was provided about this.

The infant is presently at the [REDACTED] in [REDACTED]. Law Enforcement is requesting immediate contact as they need immediate DCS involvement. They would like the DCS case worker to contact the [REDACTED] at [REDACTED].

The referent refused to provide the infant's current condition. It is unknown if the infant was breathing when the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

infant was found. All of this is unknown due to the referent's refusal to provide it.
 No known special needs/disabilities at this time.
 Any other safety concerns worker who may respond: None

Per SDM: Investigative Track, P1-[REDACTED], [REDACTED] 08/9/2014 @12:35pm

[REDACTED] notified at 12:42 P.M.

Update from County: Contact from [REDACTED] at 1:00 P.M. reported that [REDACTED] spoke with Law Enforcement and discovered that the infant is deceased. No other information is known at this time. [REDACTED] is responding.

Email notification sent to [REDACTED] notification group.

Severe Abuse Notification is made to the District Attorney's Office by local protocol. A copy of such notification is contained within the file. Notification is made monthly to the Juvenile Court Judge according to local protocol.

NEXT STEPS:

Convene CPIT if this is a severe abuse case.

Make face to face contact with alleged child victim(s) to assess for immediate harm factors and then complete all required tasks as defined by DCS work aid 2.

Household Composition:

Mother: [REDACTED] DOB: [REDACTED]

ACV [REDACTED]

Address: [REDACTED]

Phone: [REDACTED]

Grandmother's Household composition:

Maternal Grandmother: [REDACTED]

Granddaughter to [REDACTED] daughter to [REDACTED]

Address: [REDACTED]

Phone: [REDACTED]



Family Functional Assessment

Case Name: _____ Case ID: _____
 Primary Case Worker: _____ Begin Date: 08/24/2014
 Last Review By: _____ Last Review Date: _____

I. Current Circumstances:

A. Reason For Involvement:

08/24/2014 - [REDACTED] - Family - The child is not in state custody.

[REDACTED] (age 3 months) resides with his mother [REDACTED]. It is unknown if there are any other children in the home.

Today 08-09-2014 around 11:40 A.M. [REDACTED] mother contacted Law Enforcement about the infant being found unresponsive. It is unknown if the infant was breathing. No further details were provided about how the child became unresponsive. The infant was taken to the [REDACTED] in [REDACTED] Tennessee. The referent is not disclosing the child's condition at this time as they report they are not able to disclose this information over the phone due to confidentiality concerns.

The infant was reportedly in the care of a juvenile babysitter, [REDACTED] age 15, at some point today. No further information was provided about this.

The infant is presently at the [REDACTED] in [REDACTED]. Law Enforcement is requesting immediate contact as they need immediate DCS involvement. They would like the DCS case worker to contact the [REDACTED].

The referent refused to provide the infant's current condition. It is unknown if the infant was breathing when the infant was found. All of this is unknown due to the referent's refusal to provide it.

No known special needs/disabilities at this time.

Any other safety concerns worker who may respond: None

B. Family Story:

II. Assessment of Family Strengths and Needs/Risks:

A. Family Significant Strengths:

B. Family Significant Needs/Risks/Concerns:

III. Person Information:

A. Children:

B. Adults:

07/19/2014 - [REDACTED] - FAST - [REDACTED] - [REDACTED] used marijuana throughout the pregnancy until the last 3 weeks before giving birth to [REDACTED].

C. Family Together History:

D. Other Significant Relationships:

E. Legal/Court/DCS History:

Intake ID	Decision Date / Time	Intake Type	Investigation ID/ Assessment ID
[REDACTED]	05/08/2010 03:09 AM	CPS	[REDACTED]
[REDACTED]		CPS	[REDACTED]

Action Date	Action Category	Action Type	Court Docket #	Action Concerning	Additional Info
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IV. Assessment of Safety:

- 05/30/2012 - [REDACTED] - Safety - [REDACTED] -
- 07/31/2015 - [REDACTED] - Safety - [REDACTED] -
- 08/24/2014 - [REDACTED] - Safety - [REDACTED] -
- 07/16/2014 - [REDACTED] - Safety - [REDACTED] -
- 06/23/2014 - [REDACTED] - Safety - [REDACTED] -
 [REDACTED] used marijuana throughout the pregnancy. [REDACTED] admitted to using the substance stating that her OB/GYN told her to stop 30 days before having the baby.
- 06/18/2012 - [REDACTED] - Safety - [REDACTED] would either tell [REDACTED] that [REDACTED] was in [REDACTED] with her father when she did answer [REDACTED] calls, or she would not answer or return [REDACTED] calls.
- [REDACTED] did test positive for THC on a UDS.

V. Assessment of Well Being:

VI. Assessment of Permanence:

VII. Assessment of Resources:

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
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Worker's Signature

Date

Supervisor's Signature

Date



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker: [REDACTED]

Date of Referral: 5/8/14 2:36 PM

Date of Assessment: 7/16/14 12:00 AM

Assessment Type: Closing

Number of Children in the Household: 2

Section 1: Immediate Harm Factors

Directions: The following factors are behaviors or conditions that may be associated with a child being in immediate danger of serious harm. Identify the presence of absence of each factor by making either "yes" or "no". Note: The vulnerability of each child needs to be considered throughout the assessment. Children ages zero through six cannot protect themselves. For older children, inability to protect themselves could result from diminished mental or physical capacity or repeated victimization.

Yes No

1. Caretaker caused serious physical harm to the child, or made a plausible threat to cause serious physical harm in the current investigation indicated by (check all that apply):
- Serious injury or abuse to child other than accidental.
 - Death of a child due to abuse or neglect.
 - Care taker fears that s/he will maltreat the child.
 - Threat to cause harm or retaliate against the child.
 - Excessive discipline or physical force.
 - Drug-affected infant/child.
 - Methamphetamine lab exposure.
2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
4. Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.
5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
9. Domestic violence exists in the home and poses a risk of serious physical and/or emotional harm to the child.



Tennessee Department of Children's Services

SDM™ Safety Assessment

10. Caretaker describes the child in predominantly negative terms or acts toward the child in negative ways that result in the child being a danger to self or others, acting out aggressively, or being severely withdrawn and/or suicidal.
11. Caretaker's emotional stability, developmental status, or cognitive deficiency seriously impairs his/her current ability to supervise, protect, or care for the child.
12. There is a pattern of prior investigations and/or behavior that suggests an escalating threat to child safety.
13. Other (specify)

If no immediate harm factors are observed, proceed to Section 3

Section 2: Safety Interventions

If no immediate harm factors are present, go to Section 3. If one or more immediate harm factors are present, consider whether safety interventions one through eight will allow the child to remain in the home for the present time. Check the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by checking item nine or ten, and follow procedures for initiating a voluntary agreement or taking the child into protective custody. Mark all that apply:

Non-Protective Custody Interventions:

1. Intervention or direct services by worker as part of a safety plan.
2. Use of family, neighbors, or other individuals in the community as safety resources.
3. Use of community agencies or services as immediate safety resources.
4. Have caretaker appropriately protect the victim from the alleged perpetrator.
5. Have the alleged perpetrator leave the home, either voluntarily or in response to legal action.
6. Have the non-offending caretaker move to a safe environment with the child.
7. Legal action planned or initiated - child remains in the home.
8. Other (Specify): _____

Protective Custody Interventions:

9. Caretaker signs a voluntary placement agreement that places the child in Department of Children Services (DCS) custody.
10. Child placed in protective custody pursuant to 37-1-113 and 37-1-117 because no interventions are available to adequately ensure the child's safety.



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Section 3: Safety Decision

Identify the safety decision. This decision should be based on the assessment of all immediate harm factors, safety interventions, and any other information known about the family. Mark only one.

- 1. **Safe.** No immediate harm factors were identified at this time. Based on currently available information, there are no children likely to be in immediate danger of serious harm.
- 2. **Conditionally Safe.** One or more immediate harm factors are present, and one or more protecting interventions #1-8 have been planned or taken. Based on protecting interventions, no protective custody action is necessary at this time.
- 3. **Unsafe.** One or more immediate harm factors are present, and placement is the only protecting intervention (#9 or #10) possible for one or more children. Without placement, one or more children will likely be in danger of immediate or serious harm.
 - All children placed.
 - One or more children being placed in protective custody, but others remain in the home. Complete the status of each child below only when one or more children are being removed, but others remain in the home:

Children Removed

Children Not Removed

Case Manager: _____

Date: _____

Team Leader: _____

Date: _____



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Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker: [REDACTED]

Date of Referral: 8/9/14 11:51 AM

Date of Assessment: 8/9/14 12:00 AM

Assessment Type: Initial

Number of Children in the Household: 1

Section 1: Immediate Harm Factors

Directions: The following factors are behaviors or conditions that may be associated with a child being in immediate danger of serious harm. Identify the presence of absence of each factor by making either "yes" or "no". Note: The vulnerability of each child needs to be considered throughout the assessment. Children ages zero through six cannot protect themselves. For older children, inability to protect themselves could result from diminished mental or physical capacity or repeated victimization.

Yes No

1. Caretaker caused serious physical harm to the child, or made a plausible threat to cause serious physical harm in the current investigation indicated by (check all that apply):
- Serious injury or abuse to child other than accidental.
 - Death of a child due to abuse or neglect.
 - Care taker fears that s/he will maltreat the child.
 - Threat to cause harm or retaliate against the child.
 - Excessive discipline or physical force.
 - Drug-affected infant/child.
 - Methamphetamine lab exposure.
2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
4. Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.
5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
9. Domestic violence exists in the home and poses a risk of serious physical and/or emotional harm to the child.



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10. Caretaker describes the child in predominantly negative terms or acts toward the child in negative ways that result in the child being a danger to self or others, acting out aggressively, or being severely withdrawn and/or suicidal.
11. Caretaker's emotional stability, developmental status, or cognitive deficiency seriously impairs his/her current ability to supervise, protect, or care for the child.
12. There is a pattern of prior investigations and/or behavior that suggests an escalating threat to child safety.
13. Other (specify)

If no immediate harm factors are observed, proceed to Section 3

Section 2: Safety Interventions

If no immediate harm factors are present, go to Section 3. If one or more immediate harm factors are present, consider whether safety interventions one through eight will allow the child to remain in the home for the present time. Check the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by checking item nine or ten, and follow procedures for initiating a voluntary agreement or taking the child into protective custody. Mark all that apply:

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Section 3: Safety Decision

Identify the safety decision. This decision should be based on the assessment of all immediate harm factors, safety interventions, and any other information known about the family. Mark only one.

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