



Tennessee Department of Children's Services  
**Notice of Child Death/Near Death**

Case # 2014.142

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	08/26/2014	
Type: (Please check one)	<input type="checkbox"/> DEATH	<input checked="" type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	08/26/2014		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input type="checkbox"/> Male	<input checked="" type="checkbox"/> Female	Race/Ethnicity:	Black or African American	County/Region:	██████████ / ██████████
Parents' Names:	Mother:	██████████	Father:	Currently Unknown		
Alleged Perpetrator's Name:	██████████	Relationship to Victim:	Mother's paramour			
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:			
If child is in DCS custody, list placement type and name:						
Describe (in detail) circumstances surrounding death/near death:						
<p>The family was staying at the ██████████ Hotel in ██████████ TN. ██████████ police received a call from ██████████ Hospital, where ██████████ had taken minor. It was reported that minor had tripped on a "flip flop" while going downstairs and fell down the exterior stairs of the hotel. Minor was unconscious, and didn't have a heartbeat for several minutes. Minor was resuscitated. Minor has severe head trauma and was transported to ██████████ Children's Hospital for further evaluation and treatment. Hospital personnel believe that minor's injuries are suspicious. At the time of the accident, mother was at work, and minor was being supervised by mother's paramour, ██████████.</p> <p>Minor is currently on life support, and appears to be "brain dead". Medical staff are currently evaluating minor's medical condition and prognosis.</p>						
If this is a near death certified by a physician, identify physician by name and provide contact information:						
Name of Physician:	Drs. ██████████	Telephone #	██████████			
Street Address:	██████████ Children's Hospital	City/State/Zip:	██████████ TN. ██████████			
Describe (in detail) interview with family:						
<p>Mother's paramour stated that he and minor had returned from the hotel breakfast, and while at the top of the stairs, minor, who had been carrying a cup of milk, suddenly turned and fell all the way down the stairs. Minor's 5 year old half brother stated that paramour has been physically abusive to both he and his sister (minor victim). Mother, who was interviewed later, denied any knowledge of abuse by paramour, and stated that the 5 year old male minor tends to "lie".</p>						
If child was hospitalized, describe (in detail) DCS involvement during hospitalization:						
<p>Assigned investigator ██████████ accompanied law enforcement at the scene of the accident; the hotel, as well as at the hospital. CM ██████████ along with CMs ██████████ and ██████████, located the other two minors and took them into protective custody. They also accompanied those minors to the ██████████ Co. Child Advocacy Center, where the 5 year old brother received a forensic interview. From there, both minors were taken back to the hospital for physical examinations and skeletal surveys. Once foster care was arranged, those minors were taken to their resource home. CM ██████████ is back at the hospital with law enforcement, to further assess the situation.</p>						
Describe disposition of body (Death):						
Name of Medical Examiner/Coroner:				Was autopsy requested?	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Did CPS open an investigation on this Death/Near Death?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes				
Was there DCS involvement at the time of Death/Near Death?	<input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes			
Type:	Case #:					
Describe law enforcement or court involvement, if applicable:						
██████████ Police are currently investigating. Criminal charges will be filed against both ██████████; paramour, and						

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child's Case File

CS-0635, Rev. 08/13

RD A 2993

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mother, but they are currently waiting to see if minor will survive.

**Describe (in detail) action taken to ensure safety of other children (list names and ages of surviving children) and/or victim (Near Death) (attach safety plan, if applicable):**

DCS Chief Legal Counsel [REDACTED] was notified, who gave permission to take the remaining two minors into protective custody. They are both placed in the same foster home.

Name: [REDACTED]	Age: 5
Name: [REDACTED]	Age: 1
Name:	Age:
Name:	Age:
Name:	Age:

**Prior DCS involvement with the family. Include dates, type, case #s, allegations, victims, perpetrators (if applicable), and classifications/adjudications (if applicable):**

Date	Case #	Allegations	Victims	Perpetrators	Classification/Adj
07/25/2014	[REDACTED]	LOS	[REDACTED]	[REDACTED]	No Services Needed
09/24/2013	[REDACTED]	PHA	[REDACTED]	[REDACTED]	Administrative Closure
09/16/2013	[REDACTED]	PHA	[REDACTED]	[REDACTED]	AUPU
05/25/2012	[REDACTED]	ENN	[REDACTED]	[REDACTED]	Resource Linkage
/ /					
/ /					
/ /					

Any media inquiry or is attention expected?  No  Yes List organizations requesting information: None yet.

**Contact Person/Phone Number(s) (include CM, TL, and TC):**

Contact Person:	Telephone Number: ( ) -
Case Manager: [REDACTED]	Telephone Number: [REDACTED]
Team Leader: [REDACTED]	Telephone Number: [REDACTED]
Team Coordinator: [REDACTED]	Telephone Number: [REDACTED]

ATTACH a copy of the TFACTS Incident Report or if TFACTS is inoperable, DCS Form CS-0496, Serious Incident Report to this notice.  No  Yes

**Email to: [REDACTED]**  
**within forty-eight (48) hours of notification**  
**Include subject line (in RED): CHILD DEATH [secure email] or**  
**CHILD NEAR DEATH [secure email]**



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

**Intake**

Intake ID: [REDACTED]  
 Intake Taken By: [REDACTED] Intake Date/Time: 08/26/2014 10:26 AM [REDACTED]  
 Track Assigned: Investigation Priority Assigned: 1  
 Screened By: [REDACTED]  
 Date Screened: 08/26/2014

**Investigation**

Investigation ID: [REDACTED]  
 First County/Region: [REDACTED]  
 Date/Time Assigned : 08/27/2014 12:33 PM  
 First Team Leader Assigned: [REDACTED] Date/Time 08/27/2014 12:00 AM  
 First Case Manager [REDACTED] Date/Time 08/27/2014 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	3 Yrs	Physical Abuse	Yes	Unknown Participant [REDACTED] Unknown	None

**Preliminary Near Death:** [REDACTED]

**Referent(s)**

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

Referent Address:

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: E-mail

Narrative: TFACTS: Yes

Family Case ID: [REDACTED]

\*Additional history on the mother as a minor in [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody Yes [REDACTED] / [REDACTED] 1-12-09 to 5-18-10

Open CPS No

Substantiated None

Death No

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

Screened out 3

History (not listed above):

7-25-14/ # [REDACTED] LOS/ No Services Needed  
9-24-13/ # [REDACTED] PHA/ Administrative Closure  
9-13-13/ # [REDACTED] PHA/ Unsubstantiated  
5-11-12/ # [REDACTED] Resource Linkage

County: [REDACTED]  
Notification: Email  
School/ Daycare: Unknown  
Native American Descent: None  
Directions: None Given

Reporter's name/relationship: [REDACTED]

Reporter states: [REDACTED] (3) and unknown child (age 1 or under) live with their father, [REDACTED]. The family is staying at an unknown room number at the [REDACTED] on [REDACTED]. It is unknown if anyone else stays in the room. [REDACTED] is not in DCS custody.

Today, the [REDACTED] Police Department received a call from [REDACTED] Hospital. [REDACTED] took [REDACTED] to the hospital this morning and she was unconscious. [REDACTED] said that [REDACTED] had tripped on a flip flop while going downstairs and fell. [REDACTED] didn't have a heartbeat for several minutes. [REDACTED] was resuscitated. [REDACTED] left eye is black and the tops of both ears are black and blue. [REDACTED] has not yet been evaluated for further injuries or fractures. Hospital personnel believe that the injuries are suspicious.

[REDACTED] is in route to [REDACTED] Hospital to be treated. It is unknown at this point if [REDACTED] is in stable condition. [REDACTED] is with [REDACTED] and he has the other child with him. The mother (name unknown) is at work and is supposed to be on her way to the hospital.

Law enforcement is requesting an immediate call back from a CPS investigator.

Special Needs or Disabilities: None  
Child's current location/is the child safe at this time: At hospital  
Perpetrator's location at this time: At hospital  
Any other safety concerns for the child(ren) or worker who may respond: None known

NOTE: The complete address for the family is unknown. The addresses in TFACTS are not current. The most recent intake from 7/24/14 lists an [REDACTED] TN address. Also, note the referent spelled the participant's names, but TFACTS lists the child's name as [REDACTED]. TFACTS identifies a sibling named [REDACTED] (5), the mother as [REDACTED], and the father as [REDACTED]. [REDACTED] is listed as a non-relative household member (the mother's boyfriend).

Per SDM: Investigative Track / P1, LE is requesting an immediate call back. [REDACTED], CM3 @ 1105a on 8-26-14.

Please note that [REDACTED] County has already been notified by TC [REDACTED] but due to TFACTS going down, this intake is being submitted @ 1259p on 8-26-14.

Notified Child Death/Preliminary Near Death Notification Group via Email:

Emailed Regional Administrator of the [REDACTED] Region, [REDACTED]. Emailed Deputy Regional Administrator [REDACTED] per RA [REDACTED] automatic reply email.  
Emailed [REDACTED] County.



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



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

**Participant(s)**

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: Black/African Age: 3 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

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: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: Black/African Age: 35 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:**

1 Yr 8 Mos (Est)

**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  
 Child Protective Service Investigation Summary  
 and Classification Decision of Child Abuse/Neglect Referral**

**A. Investigation**

Case Name: [REDACTED]  
 Referral Date: 08/26/2014  
 Street Address:  
 City/State/Zip:

Investigation ID: [REDACTED]  
 Assignment Date: 08/27/2014

**B. Allegation**

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			Classified Date
1	[REDACTED]	[REDACTED]	Physical Abuse	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 10/07/2014
2	[REDACTED]	[REDACTED]	Physical Abuse	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 09/26/2014
3	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 09/26/2014
4	[REDACTED]	[REDACTED]	Sexual Abuse	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 09/26/2014
5	[REDACTED]	[REDACTED]	Sexual Abuse	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 09/26/2014
6	[REDACTED]	[REDACTED]	Physical Abuse	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 10/07/2014
7	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	*Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] L 11/26/2014
8	[REDACTED]	[REDACTED]	Sexual Abuse	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 10/07/2014

Preliminary Near Death: [REDACTED]

**C. Disposition Decision**

Disposition Decision: Continue DCS Services

Comments: [REDACTED] passed away from her injuries. [REDACTED] and [REDACTED] were placed into the custody of the Department of Children's Services.



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

Case Name : ██████████

Investigation ID: ██████████

**D. Case Workers**

Case Worker: ██████████

Date: 10/07/2014

Team Leader: ██████████

Date: 11/26/2014

**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:**

It was reported by ██████████ that he and ██████████ called ██████████. He stated that "█████████ and his mommy had both hit him before. He stated that his mommy told him that ██████████ had fallen down the stairs and that ██████████ was in jail. He stated that he knew that ██████████ had pushed his sister down the stairs. He stated that ██████████ had thrown ██████████ on the bed and that she bounced off and she played dead. He stated that ██████████ had a mark on her face. He stated that ██████████ had punched him in the stomach and punched him in the face. He stated that ██████████ had kicked ██████████ when they were in the bathroom. He stated that ██████████ kept kicking ██████████ in the back. He stated that his momma had punched him in the chest before. He stated that ██████████ whipped both of them with a belt. ██████████ stated that ██████████ was good to his baby sister ██████████ but that he was not good to him and ██████████. He stated that ██████████ had a lot of bumps on her body and that they were not going away. He stated that he was afraid of ██████████ and he was afraid of his mother.

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

Dr. ██████████, child abuse specialist was interviewed at Children's Hospital. She reported that the injuries to ██████████ were consistent with a severe beating. She reported that some of the bruises were older, so she felt that the abuse had been ongoing. She reported that there was no way that child could have received the type of injuries that she had by falling down the stairs.

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

paramour, ██████████ and the mother, ██████████ ██████████ has been arrested and charged with criminal homicide and 2 counts of aggravated child abuse and neglect. Mr. ██████████ still maintains that ██████████ fell down the stairs and denies that he abuse any of the children. The mother denies that she abused the children and still does not think that Mr. ██████████ hurt her children. After all the interviews were completed it was decided that the mother knew Mr. ██████████ was abusing the children and that she failed to protect the children. The autopsy listed the cause of death as the child being beat to death. Evidence of sexual abuse was discovered when the autopsy was completed on ██████████

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

█████████ (3) and unknown child (age 1 or under) live with their father, ██████████. The family is staying at an unknown room number at the ██████████ on ██████████ in ██████████. It is unknown if anyone else stays in the room. ██████████ is not in DCS custody.

Today, the ██████████ Police Department received a call from ██████████ Hospital. ██████████ took ██████████ to the hospital this morning and she was unconscious. ██████████ said that ██████████ had tripped on a flip flop while going downstairs and fell. ██████████ didn't have a heartbeat for several minutes. ██████████ was resuscitated. ██████████ left eye is black and the tops of both ears are black and blue. ██████████ has not yet been evaluated for further injuries or fractures. Hospital personnel believe that the injuries are suspicious.

█████████ is in route to ██████████ Hospital to be treated. It is unknown at this point if ██████████ is in stable



**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]

condition. [REDACTED] is with [REDACTED] and he has the other child with him. The mother (name unknown) is at work and is supposed to be on her way to the hospital.

Law enforcement is requesting an immediate call back from a CPS investigator.

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

The case will be closed and classified as allegation substantiated and perpetrator substantiated for the allegations of neglect death, physical abuse, and sexual abuse against [REDACTED] and [REDACTED].

Distribution Copies: 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] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/07/2015

Contact Method:

Contact Time: 01:00 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/07/2015

Completed date: 02/07/2015

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 02/07/2015 01:16 AM      Entered By: [REDACTED]

Case has been submitted for closure. LI reviewed case in its entirety. Closure approved by LI [REDACTED]



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED] Case Name: [REDACTED]  
 Case Status: Close Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 01/20/2015 Contact Method:  
 Contact Time: 03:00 PM Contact Duration: Less than 05 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 02/05/2015  
 Completed date: 02/05/2015 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: 02/05/2015 07:17 PM Entered By: [REDACTED]

Closing Summary for [REDACTED]

The Department of Children's Services Investigations Unit received a referral on 8/26/2014 with the allegation of physical abuse with the alleged victim being [REDACTED]. The alleged perpetrator was [REDACTED], mother's paramour. [REDACTED] was not in the custody of the Department of Children's Services at the time of the incident. On the day of the incident [REDACTED] siblings, [REDACTED] and [REDACTED] were placed into protective custody.

On 8/26/2014 [REDACTED] was transported by [REDACTED] to [REDACTED] Hospital. When [REDACTED] arrived at the hospital she was unconscious and did not have a heartbeat. [REDACTED] was resuscitated at [REDACTED] Hospital. It was noted at [REDACTED] that [REDACTED] left eye was black and the tops of both of her ears were bruised. Mr. [REDACTED] reported that [REDACTED] had tripped on a flip flop while going upstairs and fallen to the bottom of the stairs. He reported that she had busted her lip but that he saw no more injuries from the fall. He reported that she was talking after the fall and that she walked back to the room. He stated that she had complained about her head hurting and that he decided to take her to the hospital. [REDACTED] was transported the [REDACTED] Hospital and admitted to the Pediatric Intensive Care Unit. At [REDACTED] Hospital it was noted that [REDACTED] had massive head trauma and severe bruising all over the child's body. Dr. [REDACTED] reported that the child's injuries were not consistent with the story of the fall down the stairs. [REDACTED] was pronounced dead at 11:30pm on 8/27/2014.

The investigation into this incident was conducted by [REDACTED] Police Department Detective [REDACTED], [REDACTED] Police Department Homicide Detective [REDACTED], Department of Children Services Investigator [REDACTED] and Department of Children Services Lead Investigator [REDACTED].

The report to the Department of Children's Services listed the mother's paramour, [REDACTED] as the alleged perpetrator. After convening The Child Protective investigation Team it was decided to add the mother, [REDACTED], as an alleged perpetrator as well. During the course of the investigations several interviews were conducted with sibling, family, and medical personal.

As part of the investigation a forensic interview was completed on [REDACTED]. It was reported by [REDACTED] that he and [REDACTED] called [REDACTED]. He stated that [REDACTED] and his mommy had both hit him before. He stated that his mommy told him that [REDACTED] had fallen down the stairs and that [REDACTED] was in jail. He stated that he knew that [REDACTED] had pushed his sister down the stairs. He stated that [REDACTED] had thrown [REDACTED] on the bed and that she bounced off and she played dead. He stated that [REDACTED] had a mark on her face. He stated that [REDACTED] had punched him in the stomach and punched him in the face. He stated that [REDACTED] had kicked [REDACTED] when they were in the bathroom. He stated that [REDACTED] kept kicking [REDACTED] in the back. He stated that his momma had punched him



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████ Region

in the chest before. He stated that ██████ whipped both of them with a belt. ██████ stated that "█████" was good to his baby sister ██████ but that he was not good to him and ██████. He stated that ██████ had a lot of bumps on her body and that they were not going away. He stated that he was afraid of ██████ and he was afraid of his mother. The mother, ██████ was interviewed and she reported that she had never seen ██████ hit or abuse any of her children. She reported that she was at work at the time of the incident and that Mr. ██████ had called her at work and told her that ██████ had fallen down the stairs. She denied that she had ever abused or hurt any of her children. ██████ was interviewed by Detective ██████. Detective ██████ stated that he had spoken to ██████ before he left the hospital and that he had stated that he had gone with both ██████ and the baby to the lobby to get breakfast. He stated that they were heading back to the room on the 2nd floor and that ██████ had gone up the steps in front of him. He stated that he was at the bottom of the stairs and that ██████ had gone up the stairs. He stated that she was wearing flip flops and that she was holding a Styrofoam cups with milk in it. Mr. ██████ stated that ██████ had gotten to the next to last step at the top and turned around to look at him and had fallen all the way down the stairs. He reported that the milk had spilled when she had fallen. He stated that she was talking after she fell down the stairs. He reported that she had busted her lip when she had fallen down the stairs and that he was very concerned with that injury. He reported that after going to their motel room that ██████ had complained of her head hurting. He stated that it was then that he decided to take her to the hospital. He reported that he carried the baby to the car and that ██████ had walked to the car. He reported that ██████ was awake and talking to him until he was halfway to the hospital. He reported that he had decided to go to ██████ Hospital because he did not know where any other hospitals were. He reported that he was about 10 minutes away from the hospital when ██████ became unresponsive. He reported that besides the busted lip that he did not see any other injuries on ██████. The maternal aunt, ██████, and the maternal grandmother, ██████ were interviewed at the hospital. They both reported that Mr. ██████ was mean to ██████ and ██████. They reported that they see marks and bruises on both children, but that the mother always denied any abuse. They reported that ██████ had a black eye a few weeks ago and that she had a mark on her forehead as well. They reported that they did not think that ██████ would hurt the children, but that Mr. ██████ would. Dr. ██████ child abuse specialist was interviewed at ██████ Hospital. She reported that the injuries to ██████ were consistent with a severe beating. She reported that some of the bruises were older, so she felt that the abuse had been ongoing. She reported that there was no way that child could have received the type of injuries that she had by falling down the stairs.

DCS policy work aid defines the following criteria for Child Neglect Death, Sexual Abuse, and Physical abuse as:

**Near Death**

A near death, per Tennessee Code Annotated (TCA) 35-5-107(c)(4) is defined as a serious or critical medical condition resulting from abuse, neglect or child sexual abuse, as reported by a physician who has examined the child subsequent to the abuse or neglect.

NOTE: When an initial referral or a referral on an open case contains information that suggests the child is in a serious or critical medical condition as a result of the allegation(s) or has been determined to meet the criteria for an allegation of near death as defined above, the Child Abuse Hotline will select Preliminary Near Death (PND) Indicator in TFACTS on the participants tab on a new intake or the investigative persons tab on an active case. The information does not have to come from a physician.

NOTE: Preliminary near deaths are always treated as severe child abuse.

**Child Sexual abuse:**

1. Child sexual abuse occurs when a child who is under the age of 13 or was under the age of 13 when the abuse occurred or a child is age 13-18 and meets the relationship criteria per policy, and the child is involved in intentional sexual acts that produce sexual arousal and/or gratification for the perpetrator including:
  - a) Explicit sexual acts;
  - b) Vaginal, oral, anal, or digital penetration with or without the use of an object;
  - c) Touching, fondling, molestation or intentional contact with genitals, buttocks, or breasts of child or perpetrator. This also includes when adolescents or adults instruct children to engage in such behaviors with each other;
  - d) Indecent exposure and voyeurism; and
  - e) Intentionally exposing a child to sexually explicit material.
2. Sexual behaviors or situations in which the motivation may or may not be sexual, but there is a clear sexual component such as:
  - Taking pictures or videos of children engaging in sexual activities or in sexually explicit poses;
  - Making children available to others for sexual purposes;
  - The sexual gratification or benefit of an adult;
  - Use of a child for prostitution; and
  - Caregiver has knowledge or reasonable suspicion of child sexual abuse by another person and intentionally fails to



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████ Region

intervene or protect child.

NOTE: Sexual abuse is always considered severe.

Physical abuse:

Any non-accidental physical injury or trauma that could cause injury inflicted by a parent, caretaker, relative or any other person who is responsible for the care, supervision or treatment of the child. Physical abuse also includes but not limited to:

- a) A parent or caretaker's failure to protect a child from another person who perpetrated physical abuse on a child;
- b) Injuries, marks and/or bruising that goes beyond temporary redness or is in excess of age appropriate corporal punishment, e.g., a bruise, broken bone, cut, burn;
- c) Violent behavior by the parent or caretaker that demonstrates a disregard for the presence of a child and could reasonably result in serious injury (e.g., domestic violence). Striking (hitting, kicking, punching, slapping, etc.) a child in such a way that would result in internal injury. Munchausen by Proxy Syndrome could be considered physical abuse or psychological abuse.

NOTE: Physical abuse should not be confused with developmentally appropriate, discipline-related marks and bruises on the buttocks or legs of children six (6) years of age and older when there are no developmental or physical delays, past history of abuse or recent (within the past year) screened-out reports.

Case was presented to Child Protective Investigations Team in ██████████ County on 11/19/2014. The allegations and case findings were discussed with the panel. It was agreed upon to classify the allegations of Neglect Death, Physical Abuse, and Sexual Abuse against the paramour, ██████████ and the mother, ██████████.

██████████ has been arrested and charged with criminal homicide and 2 counts of aggravated child abuse and neglect. Mr. ██████████ still maintains that ██████████ fell down the stairs and denies that he abuse any of the children. The mother denies that she abused the children and still does not think that Mr. ██████████ hurt her children. After all the interviews were completed it was decided that the mother knew Mr. ██████████ was abusing the children and that she failed to protect the children. The autopsy listed the cause of death as the child being beat to death. Evidence of sexual abuse was discovered when the autopsy was completed on ██████████.

There is a preponderance of evidence to support the allegations of Neglect Death, Sexual abuse, and Physical abuse.

At this time there is a pending severe abuse finding against the mother in ██████████ County Juvenile Court. The mother has not been charged with anything criminally at this time.

The case will be closed and classified as allegation substantiated and perpetrator substantiated for the allegations of neglect death, physical abuse, and sexual abuse against ██████████ and ██████████.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 11/26/2014	Contact Method:
Contact Time: 10:00 AM	Contact Duration: Less than 30
Entered By: [REDACTED]	Recorded For:
Location: DCS Office	Created Date: 11/26/2014
Completed date: 11/26/2014	Completed By: [REDACTED]
Purpose(s): Safety - Child/Community, Well Being	
Contact Type(s): Administrative Review	
Contact Sub Type:	

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

Narrative Type: Original      Entry Date/Time: 11/26/2014 09:15 AM      Entered By: [REDACTED]

LI was able to approve recommended classifications. Investigator has recommended Substantiated classifications for all allegations against both mother and her paramour. Classifications were presented to, and accepted by the CPIT panel finally on 11/19/14. LI also concurs. LI will prepare the Formal File review letters and Attachment As., to be sent to both alleged perpetrators via certified mail, and a copy forwarded to DCS Legal in [REDACTED] Co. Notification of Classification will also be sent to [REDACTED] Co. Juvenile Court and the District Attorney's Office via 740 forms.

Narrative Type: Addendum 1      Entry Date/Time: 11/26/2014 09:29 AM      Entered By: [REDACTED]

LI changed the Substantiated death allegation involving [REDACTED] from Neglect Death to Abuse Death, since Mr. [REDACTED] has been criminally charged with Criminal Homicide.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/24/2014

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 11/24/2014

Completed date: 11/24/2014

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 11/24/2014 02:03 PM      Entered By: [REDACTED]

Autopsy was recieved on [REDACTED] and was added into TFACTS.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/24/2014

Contact Method:

Contact Time: 12:40 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/24/2014

Completed date: 10/24/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 10/24/2014 11:42 AM      Entered By: [REDACTED]

Cm called the [REDACTED] County Medical Examiners Office to find out the status of [REDACTED] autopsy report. It is still not complete.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	System Completed
Contact Date:	09/24/2014	Contact Method:	
Contact Time:	03:26 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	09/28/2014
Completed date:	10/25/2014	Completed By:	System Completed
Purpose(s):	Safety - Child/Community, 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 12:36 AM      Entered By: [REDACTED]

LI discussed case with [REDACTED], Deputy Director of Child Safety, specifically to inform her that assigned investigator [REDACTED] is ready to classify, as investigation has been open for almost 30 days, but case had just been passed by our CPIT panel, as we are considering criminal charges placed against the mother, as well as the alleged perpetrator. Ms. [REDACTED] stated that LI can document that classification is ready, with the exception of being accepted by the CPIT panel. Once classifications have been presented to, and accepted by the CPIT panel, LI can then officially approve of all classifications in TFACTS. LI will then complete the Formal File Review letter and Attachment A., to be sent to the alleged perpetrators.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/23/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

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): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/23/2014 09:19 AM      Entered By: [REDACTED]

Case manager called the [REDACTED] County Medical Examiner's Office regarding the autopsy on [REDACTED]. Case manager was advised that they were still pending.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 09/05/2014	Contact Method: Face To Face
Contact Time: 01:00 PM	Contact Duration: Less than 03 Hour
Entered By: [REDACTED]	Recorded For:
Location: Other Community Site	Created Date: 09/16/2014
Completed date: 09/16/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): ACV Interview/Observation,Parent/Caretaker Interview,Sibling Interview/Observation	
Contact Sub Type:	

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 09/16/2014 12:18 AM Entered By: [REDACTED]

Case Manager [REDACTED] along with the [REDACTED], transported [REDACTED] and [REDACTED] to the funeral home for the service for [REDACTED]. Case manager [REDACTED] stated with [REDACTED] the whole time to ensure that no one tried to talk to him about the injuries, Mr. [REDACTED] or anything else pertaining to the case. [REDACTED] held this case manager hand and took her up to see his sister in the casket. He looked at this case manager and stated that it did not look like his [REDACTED]. He started crying and came over to hug this cm. He hugged this cm while he was crying for about 5 minutes. [REDACTED] then went to sit in his dad's lap, [REDACTED] who had attended the funeral with us as well.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/03/2014

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2014

Completed date: 09/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/03/2014 01:41 PM      Entered By: [REDACTED]

LI reviewed submitted SDM assessment. Assigned investigator [REDACTED] submitted an "unsafe" SDM assessment. Minor victim has passed away, and the two surviving minors were removed from mother's custody and taken into state custody. LI approved submitted assessment. Mother's paramour has been charged not only with felony child abuse, but also criminal homicide. Law enforcement is still investigating, and criminal charges may still be filed against mother for failure to protect.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/03/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: Court

Created Date: 09/16/2014

Completed date: 09/16/2014

Completed By: [REDACTED]

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

Contact Type(s): Court Hearing

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/16/2014 12:33 AM Entered By: [REDACTED]

Case Manager [REDACTED] attended the preliminary hearing at [REDACTED] County Juvenile Court. A Guardian ad Litem was appointed for [REDACTED] and [REDACTED]. The mother was also appointed and attorney as well as Mr. [REDACTED]. A new court date was set.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/29/2014

Contact Method: Phone Call

Contact Time: 03:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/16/2014

Completed date: 09/16/2014

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)****Narrative Details**

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

Case Manager [REDACTED] recieved a call from Detective [REDACTED] called and stated that the charges against [REDACTED] would be upgraded to criminal homicide as well as especially aggravated child abuse and 2 counts of child abuse and neglect. He stated that he was still incarcerated at the county jail. He stated that mother, [REDACTED], would stiiil not come in at talk with him. He stated she had obtained an attorney and that according to her that the attorney had advised her not to talk to the police.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/28/2014 Contact Method:  
 Contact Time: 11:30 AM Contact Duration: Less than 01 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 09/16/2014  
 Completed date: 09/16/2014 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: 09/16/2014 12:28 AM Entered By: [REDACTED]

Case Manager [REDACTED] met with DCS Attorney [REDACTED] to complete the petition to bring [REDACTED] and [REDACTED] into custody. Attorney [REDACTED] will take the petition and affidavit to court the file them.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 08/28/2014	Contact Method:
Contact Time: 09:45 AM	Contact Duration: Less than 45
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 08/28/2014
Completed date: 09/02/2014	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: 08/28/2014 11:16 AM      Entered By: [REDACTED]

A conference call staffing with [REDACTED], Interim Regional Investigation Director (RID) for [REDACTED] was held pertaining to this investigation. Those present were [REDACTED], Investigator [REDACTED], Lead Investigator, and [REDACTED], Investigation Coordinator. The initial referral alleged Severe Physical Abuse. The child has since been pronounced deceased and an allegation of Abuse Death will be added to the intake. Investigator [REDACTED] notified the Child Abuse Hot Line of the child's death and the hot line was to send notification to all designated parties per policy. The alleged perpetrator has been arrested. The mother may be charged with Child Neglect due to allowing the alleged perpetrator back in the home although he had an order of protection against him due to the AP and mother's domestic violence episode that occurred on or about 8/4/14. The two siblings of the deceased child [REDACTED] and [REDACTED] were placed in state custody. They were placed in an OMNI Vision foster home while family member placements are being searched. A diligent search will be conducted pertaining to both children. An aunt and uncles have filed a petition for custody. A MSW equivalent consult was held with [REDACTED], LI [REDACTED] County. The CPS records pertaining to prior history will be obtained from [REDACTED] and [REDACTED] Counties.

Narrative Type: Addendum 1      Entry Date/Time: 09/02/2014 02:11 PM      Entered By: [REDACTED]

Correction to the sentence regarding the mother possibly being charged with Child Neglect. "The mother may be charged with Child Neglect" is correct, however, the rest of the statement "due to allowing the alleged perpetrator back in the home although he had an order of protection against him due to the AP and mother's domestic violence episode that occurred on or about 8/4/14" is not correct.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/27/2014

Contact Method:

Contact Time: 11:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 09/15/2014

Completed date: 09/15/2014

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: 09/15/2014 11:55 PM Entered By: [REDACTED]

Case Manager [REDACTED] recieved a call from Nurse [REDACTED] at the Pediatric Intensive Care Unit stating that [REDACTED] had been pronounced brain dead at 11:30pm. She stated that the family had went in and held her and said goodbye. She stated that the mother had met with the Organ Transplant Team and that she was still deciding whether or not if she was going to donate [REDACTED] organs. She stated that mother was supposed to contact the transplant team tomorrow with her decision. She stated that she would still be hooked up to the ventilator until the mother decided.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/27/2014 Contact Method: Face To Face  
 Contact Time: 03:00 PM Contact Duration: More than 5 Hours  
 Entered By: [REDACTED] Recorded For:  
 Location: Hospital Created Date: 09/16/2014  
 Completed date: 09/16/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): ACV Interview/Observation,Medical Exam  
 Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 09/16/2014 12:41 AM Entered By: [REDACTED]

Case Manager [REDACTED] took DCS Attorney [REDACTED] to the Pediatric Intensive Care Unit to see [REDACTED] While we were there a rape kit was being completed by Dr. [REDACTED] of the medical examiners office. He stated that his preliminary find was that the child did have some kind of sexual assault.

Case manager along with the nurse showed DCS [REDACTED] all of the marks and bruises on the body of [REDACTED]



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/27/2014

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 09/15/2014

Completed date: 09/16/2014

Completed By: [REDACTED]

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

Contact Type(s): Medical Exam

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 09/16/2014 12:03 AM Entered By: [REDACTED]

Case Manager [REDACTED] went to the Pediatric Intensive Care Unit to meet with the child abuse specialist, Dr. [REDACTED]. She stated that there was no way that the injuries that [REDACTED] had were consistent with a fall down the stairs. She stated that there was also some medical evidence of sexually abuse and that she had contact Detective [REDACTED] in regards to that. She stated that he was trying to get a rape kit completed on [REDACTED]. She stated that [REDACTED] were consistent with being beat to death. She stated that a brain activity scan had been completed around 9am that morning and that it was showing no signs of brain activity. She stated that another would be completed at around 9pm and if that scan showed no signs of brain activity then [REDACTED] would be declared brain dead.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/26/2014

Contact Method: Phone Call

Contact Time: 09:30 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 09/15/2014

Completed date: 09/15/2014

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)****Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/15/2014 11:47 PM      Entered By: [REDACTED]

Case manager [REDACTED] recieved a call from Detective [REDACTED] who stated that [REDACTED] had been charged with 1 count of aggravated child abuse and 2 counts of child abuse and neglect. He stated that he had been arrested after his last interview with him. He stated that was still saying that the child had fallen down the stairs.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 08/26/2014	Contact Method: Face To Face
Contact Time: 04:30 PM	Contact Duration: More than 5 Hours
Entered By: [REDACTED]	Recorded For:
Location: Hospital	Created Date: 09/15/2014
Completed date: 09/15/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): ACV Interview/Observation,Collateral Contact,Medical Exam	
Contact Sub Type:	

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

Narrative Type: Original      Entry Date/Time: 09/15/2014 11:43 PM      Entered By: [REDACTED]

A forensic interview was completed on [REDACTED] at 4:30pm on this date. During the interview [REDACTED] disclosed very detailed physical abuse by [REDACTED] disclosed very detailed physical abuse done to him and [REDACTED] by [REDACTED]. He reported that [REDACTED] had punched him and [REDACTED] on multiple occasions, thrown [REDACTED] off the bed at the motel on more than one occasion, threw him out of the shower, hit them with belts, and pinched them. He also stated that Mr. [REDACTED] had thrown [REDACTED] on the bed on one occasion and that she had bounced off the bed and landed in the floor and "played dead". He stated that Mr. [REDACTED] would make them squat down for punishment and that he would push them over. He stated that when they fell over that they would get into more trouble for falling over.

[REDACTED] and [REDACTED] were transported to Children's Hospital for complete medical exams. [REDACTED] was examined and found no marks or bruises on her. A full skeletal survey was completed on her and no evidence of broken bones or any other physical abuse was found. Bruises were found on [REDACTED] lower back, left upper arm, on his right chest area, his left front thigh, and on his right thigh area. The bruises varied in size and [REDACTED] stated that the bruises were from [REDACTED] hitting and pinching him. No internal injuries were found on [REDACTED].

When cm [REDACTED] was walking into the hospital she was approached by [REDACTED], who identified herself as the maternal aunt of the children. She stated that her sister had called her and let her know that [REDACTED] was in the hospital. She stated that her mother, [REDACTED], and her father were in route to the hospital from [REDACTED] TN. She stated that she was worried that something like this would happen to the kids because [REDACTED] was mean to the kids. Case manager [REDACTED] was familiar with [REDACTED] due to her being in state's custody when she was minor.

The maternal grandmother, [REDACTED], arrived at the hospital. She stated that she had gotten a call from her daughter [REDACTED] telling her that [REDACTED] had fallen down the stairs at the motel. This case manager asked her if she had any concerns about the children and she stated that she thought Mr. [REDACTED] was mean to the kids because [REDACTED] had told her that he was mean to him. She stated that a few days prior that a large bruise was observed on her head and that [REDACTED] stated that she had fallen of the bed at the motel and hit her head on the nightstand.



## Tennessee Department of Children's Services

### Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

[REDACTED] arrived while this case manager was talking to her family. This case manager asked her about any previous injuries on the children and she stated that she had not seen any injuries. She denied that [REDACTED] had ever hit the children or hurt the children at all. She stated that [REDACTED] would lie about him hurting them but that she had never seen him hurt the children. She stated that she knew he would never hurt her children and that she believed that [REDACTED] had fallen down the stairs.

While [REDACTED] and [REDACTED] were being examined this case manager left them in the care of case manager [REDACTED] and case manager [REDACTED] and went to the Pediatric Intensive Care to see [REDACTED]. Case manager went to the unit with Detective from the [REDACTED] Police Department. Case manager observed bruising all over the child's body. She had long linear bruises on the back of her right thigh going around to the front her right thigh along with similar bruises on her left back thigh. The injuries were consistent with belt marks. On right outer thigh there were scratches that along with a large rectangle pattern bruise. The bruise was very about 2 inches long and .5 inches wide. The bruise was consistent with a belt that was located at the hotel room belonging to Mr. [REDACTED]. Both of [REDACTED] ears had significant bruises on the back and the front. Both ears from the middle to the top were bruises. She had bruises on her left pelvic area, bruises on her lower back, a small bruise above her left nipple, and small bruises all over both lower legs. There was also large bruising on both buttocks. She had massive head trauma to the back of her head. Her lower lip was busted on the inside from the top of her lip to the bottom of her lip on the inside. While this case manager was in the PICU with the detective a crime scene officer from the [REDACTED] Police Department came and took pictures of [REDACTED] injuries.

[REDACTED] and [REDACTED] were transported to a DCS foster home by Case Manager [REDACTED] at approx. 11:30pm.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 08/26/2014	Contact Method: Face To Face
Contact Time: 03:45 PM	Contact Duration: Less than 30
Entered By: [REDACTED]	Recorded For:
Location: DCS Office	Created Date: 10/29/2014
Completed date: 10/29/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): ACV Interview/Observation	
Contact Sub Type:	

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

Narrative Type: Original      Entry Date/Time: 10/29/2014 03:42 PM      Entered By: [REDACTED]  
 Date: 08/26/14  
 Time: 4:32PM  
 Type of Contact: Forensic Interview  
 Location of Contact: [REDACTED]  
 Primary person(s) to be interviewed & relationship: [REDACTED] [acv]

[REDACTED] stated he was 5 years old and he counted to five. He stated his birthday was [REDACTED]. [REDACTED] was able to identify colors correctly. My sister fell down the steps and [REDACTED] went to jail. I was crying and my momma was crying. He stated he wasn't there when his sister fell down the steps because he was at school. He stated his mom told him his sister fell down the steps. He stated she was walking and wasn't looking and she kept flipping over, "just like he did". He flipped backward on the steps at [REDACTED] and [REDACTED]. He stated he was playing basketball there. He stated there was a boy in front of him and he backed up and he flipped back. He stated he calls his sister [REDACTED]. He stated his mom told him his sister, [REDACTED] fell. He stated he was crying a lot and his mom was holding him and she told him not to cry. My momma came over and hit me. He pointed to the underside of his right arm. He stated it was black on his arm. He stated "he told me to put my hands on the wall", but stated he [REDACTED] didn't do anything. He stated they told me to put my back on the wall. He stated he [REDACTED] told me to go to bed. He stated my momma hit me. [REDACTED] hit me when I was in the shower and he hit him out of the shower and he fell. [REDACTED] fell down and pretended she was dead. He stated [REDACTED] pushed [REDACTED] and he saw it. He stated he was tying his shoe when he saw [REDACTED] push [REDACTED]. He stated this "was when [REDACTED] pretending she was dead". He stated [REDACTED] "did everything". He stated, "he [REDACTED] makes him sit on the wall until his legs shake". He stated he didn't remember what [REDACTED] does. He stated he was on the bed and he [REDACTED] threw her off the bed [REDACTED]. He stated [REDACTED] had a mark over her ear. He stated, "[REDACTED] had a mark on her face too". He stated he saw [REDACTED] throw [REDACTED]. He stated when we went to the store, [REDACTED] told [REDACTED] to get out of the way. He stated, "he [REDACTED] punched me in the belly". He stated he got on his tippy toes and he [REDACTED] punched me in the face. He stated, "don't you all dare move until your momma comes in". He stated [REDACTED] told him and [REDACTED] this. He stated, "he [REDACTED] pushed [REDACTED]. He stated, "he [REDACTED] pushed her off the bed". He stated, "he [REDACTED] kicked [REDACTED] when he was in the bathroom getting his momma something". He stated, "he was kicking [REDACTED] in the back". He stated, "[REDACTED] started crying". He stated, [REDACTED] and his momma were getting in an argument. He stated they were in this building and he [REDACTED] kept hitting her and then she smacked



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████ Region

him ██████████ and his momma kept saying, "stop ██████████". He stated ██████████ got in a fight with his friend and his mamaw. He stated his mamaw told this little girl to get away. He stated his mom punched him in his chest. He stated, "█████████ hit my head". He stated, "I was in the apartment and ██████████ hit me in the head". He stated a boy hit his elbow when he was walking into class. He stated he hadn't seen his momma hit ██████████. He stated living in his home is ██████████ his sister, and him. He stated, "When he ██████████ punched me in the chest, I should have took my belt off and whipped him". He stated, "█████████ gets whipped with a belt". He stated, "█████████ gives her ██████████ a whipping and him too". He stated, "█████████ gives him and his sister a whipping with a belt". He stated ██████████ has given him a whipping with a belt on his chest. He stated he had a brother but he lived somewhere else. He stated the baby that was here with him today was ██████████. He stated ██████████ lives with him too and sometimes they go to a baby-sitter. He stated ██████████ was good to ██████████ but wasn't good to "us". He stated he hadn't seen anyone hurt ██████████. He asked if "they were doctoring ██████████". He stated his sister has a whole lot of bumps and they aren't going away. He stated, "sometimes", when asked if he had ever seen anyone hurt ██████████. He stated, "someone dropped her ██████████". He stated, "she ██████████ fell off the bed". He stated, "I forgot" [then looked at the camera]. He asked if "we watched his house", and asked "if we had seen all the stuff ██████████ had done to him". He stated he hadn't seen anyone hit her or kick her. He stated he was at the park and ██████████ kept pushing him and he ██████████ kept pinching his back. He stated they didn't take him to the doctor and they just kept telling him to get in the corner. This concluded interview.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED] Case Name: [REDACTED]  
 Case Status: Close Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/26/2014 Contact Method: Face To Face  
 Contact Time: 10:45 AM Contact Duration: Less than 05 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Community Site Created Date: 09/15/2014  
 Completed date: 09/15/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): ACV Interview/Observation,Alleged Perpetrator Interview,Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/15/2014 01:03 PM Entered By: [REDACTED]

Case Manager [REDACTED] met Detective [REDACTED] at the [REDACTED] at [REDACTED]. Detective [REDACTED] was present at the hotel along with Detective [REDACTED], Homicide detective for [REDACTED] Police Department. The crime scene unit was present at the hotel as well taking pictures and collecting evidence. Detective [REDACTED] stated that the child had been transported to the [REDACTED] in a private vehicle by the boyfriend and that [REDACTED] called the police and an ambulance to transport the child to Children's Hospital [REDACTED]. He stated that he child actually had no heartbeat and that she was shocked with a defibrillator in order to get her heart beating again. He stated that he child had bruises on her arms, legs, face and significant head trauma. He stated that they did not think that the child would live and that it was believed that she had no brain activity. He stated that the mother had arrived at the hospital before he left but that he had not had a chance to talk to her. He stated that the baby that Mr. [REDACTED] had with him did belong to him and the mother. He stated that he was unsure about other children.

Detective [REDACTED] stated that he had spoken to [REDACTED] before he left the hospital and that he had stated that he had gone with both [REDACTED] and the baby to the lobby to get breakfast. He stated that they were heading back to the room on the 2nd floor and that [REDACTED] had gone up the steps in front of him. He stated that he was at the bottom of the stairs and that [REDACTED] had gone up the stairs. He stated that she was wearing flip flops and that she was holding a Styrofoam cups with milk in it. Mr. [REDACTED] stated that [REDACTED] had gotten to the next to last step at the top and turned around to look at him and had fallen all the way down the stairs. He reported that the mild had spilled when she had fallen. He stated that she was talking after she fell down the stairs. He reported that she had busted her lip when she had fallen down the stairs and that he was very concerned with that injury. He reported that after going to their motel room that [REDACTED] had complained of her head hurting. He stated that it was then that he decided to take her to the hospital. He reported that he carried the baby to the car and that [REDACTED] had walked to the car. He reported that [REDACTED] was awake and talking to him until he was halfway to the hospital. He reported that he had decided to go to [REDACTED] Hospital because he did not know where any other hospitals were. He reported that he was about 10 minutes away from the hospital when [REDACTED] became unresponsive. He reported that besides the busted lip that he did not see any other injuries on [REDACTED].



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████ Region

Case manager called and spoke to her Lead Investigator ██████████ regarding the case details that she had learned so far. Cm advised him that it did not look as if the child was going to survive. Case manager advised him that there was at least one other child in the home and that it was a baby, who was at the hospital with the family.

Case Manager reviewed the surveillance footage with the detectives. Detective ██████████ stated the Mr. ██████████ has stated that the family had gone to the lobby at about 9:30am. The footage was viewed and Mr. ██████████ was not observed coming into the lobby at all with the children. It did appear that he had carried the baby to the car at around 9:45am and gone back up to the room. About 3 minutes later he is seen going to the car again carrying what appears to be a small child. The child does not appear to be moving. It takes Mr. ██████████ about 3 minutes to do something at the back door of the car. He then gets into the car and drives to the parking area in front of the lobby. He goes into the lobby to pay for his room for the night. While in the lobby he keeps looking out the door to where his car is parked. He does not tell the clerk at the counter anything about a child falling down the stairs nor does he ask where the nearest hospital is. He then gets in the car and pulls out of the parking lot going north on ██████████ ██████████

Case manager ██████████ and Detective ██████████ went to look at the stairs located at the motel. There was no evidence of milk being spilled on any of the stairs. There was no evidence of blood on any of the stairs. There was 13 stairs that were made of concrete and steel. The crime scene unit was in the room searching the contents of the room. There was marijuana found in the room in a small box in the dresser. Detective ██████████ stated that he was going to get some lunch and then head back to the hospital. Case manager ██████████ advised that she would meet him at the hospital.

Case manager ██████████ called and spoke to case manager ██████████ and asked her to do a search on the CPS history on the family.

Case manager ██████████ called and spoke the social worker, ██████████, at Children's Hospital regarding ██████████ She stated that he child was in the PICU and that she was not doing well. Case manager ██████████ advised her that she was on her way to the hospital.

Cm received a call from case manager ██████████ who advised that there was a case that was just closed in ██████████ County and that there was a 5 year brother listed in that referral.

Cm received a call from ██████████, social worker at Children's Hospital who advised that the family had left the hospital. She stated that the mother, father, and the baby had all left the hospital. She reported that they did not tell anyone that they were leaving, but that someone had overheard them talking about going to pick the oldest child up from school. Case manager advised that she would call the social worker back.

Case manager called and spoke to DCS attorney ██████████ and explained the case details to him and that there were 2 other children in the family. Case manager asked that the children be placed into state's custody due to the injuries to ██████████ Attorney ██████████ advised that the children could be placed into custody.

Cm called the elementary school that was in the area of the motel to confirm that ██████████ attended school there. Case manager verified that he attended school there and advised that the child had been placed into protective custody and that if the mother came to pick the child up to no allow the child to leave with the mother. Case manager advised the school that she would have officers from the ██████████ Police Department in route to the school as well. Case manager advised that she was in route to the school from downtown.

Case manager called the police department and advised them of the situation and asked that officer s be sent to ██████████ Elementary school just in case the family tried to get violent or they were uncooperative with the school.

Case manager called and spoke to Detective ██████████ and advised that the other 2 children had been placed into protective custody and that the family had left the hospital without telling hospital staff. Detective ██████████ asked this case manager to ask the police at the school to place ██████████ into custody to be questioned again regarding the injuries to ██████████

Case manager ██████████ arrived at the school along with case manager ██████████ Case Manager ██████████ went into the school to speak with the mother, ██████████. Case manager explained to her that the children had been placed into



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

protective custody due to the injuries to [REDACTED]. The mother was very emotional and was crying. Case manager asked her where the baby was and she stated that the baby was in the car with Mr. [REDACTED]. Case manager left and went outside to speak to the officers who were outside. Case manager advised the officer that Detective [REDACTED] had asked the [REDACTED] be placed into police custody and transported to the police service center for questioning. Case manager went to the car along with the police officers and Mr. [REDACTED] was placed into police custody. Case manager got the baby along with the car seat and the diaper bag from Mr. [REDACTED].

Case manager [REDACTED] spoke with the mother [REDACTED], again to get the children's names and DOB from her. [REDACTED] did speak to [REDACTED] and stated that his sister had fallen down the stairs. [REDACTED] asked if [REDACTED] was going to jail and she replied that yes he was and that she was probably going to jail too. [REDACTED] was very emotional and upset about his sister. Case manager allowed the mother to hug and kiss both children before she placed them into her car.

Case manager [REDACTED] placed both children into the backseat of her car and put their seatbelts on them. As soon as case manager started driving [REDACTED] started talking to case manager saying that he knew that [REDACTED] had pushed his sister down the stairs. Case manager asked who [REDACTED] was and he responded that it was [REDACTED] his mother's boyfriend. He stated that he did not like [REDACTED] because he was mean to him and his sister. Case manager asked [REDACTED] if he was hungry and he replied that yes he was. Case manager went to [REDACTED] and got [REDACTED] a chicken nugget happy meal and a hamburger.

Case manager called the Children's Advocacy Center and asked if an emergency forensic could be set up for [REDACTED]. The forensic interview was very hesitant to set up an interview because it was so late in the afternoon. Case manager explained the importance of the interview because the child was talking very openly about his sister and the things that the mother's boyfriend had done. The forensic interviewer agreed to complete a forensic interview on [REDACTED]. Case manager advised that she was on her way to the center.

Case manager [REDACTED] called and let her Lead Investigator know that she had both children in custody and that were on the way to The Children's Advocacy Center for and interview for [REDACTED] and that the children would be transported to Children's Hospital for complete medicals.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 08/26/2014	Contact Method: Phone Call
Contact Time: 10:30 AM	Contact Duration: Less than 30
Entered By: [REDACTED]	Recorded For:
Location: Other Community Site	Created Date: 09/15/2014
Completed date: 09/15/2014	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)****Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/15/2014 11:23 AM      Entered By: [REDACTED]

Case Manager [REDACTED] received a call from Detective [REDACTED] with the [REDACTED] Police Department. He advised this case manager that he would be calling in a referral to the Child abuse hotline regarding a near death fatality. He stated that [REDACTED] had been transported to [REDACTED] Hospital by the mother's boyfriend. He stated that the mother's boyfriend, [REDACTED], had stated that the child had fallen down the stairs at the [REDACTED]. Detective [REDACTED] stated that the child's injuries were not consistent with his story and that he was headed to the [REDACTED] to review the surveillance footage at the motel. He stated that there was another child with Mr. [REDACTED] at the hospital. He stated that he child was a baby and he was not sure of the age of the child. He stated that the mother was at work at the [REDACTED] in [REDACTED] at the time of the incident. This case manger advised him that she would meet him at the motel in 10 minutes.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED] Case Name: [REDACTED]  
Case Status: Close Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
Contact Date: 08/26/2014 Contact Method:  
Contact Time: 10:26 AM Contact Duration: Less than 01 Hour  
Entered By: [REDACTED] Recorded For:  
Location: DCS Office Created Date: 09/15/2014  
Completed date: 09/15/2014 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: 09/15/2014 10:48 PM Entered By: [REDACTED]

Children: [REDACTED]  
Mother: [REDACTED] residing at [REDACTED]  
[REDACTED] Room [REDACTED]  
Father: [REDACTED] - Putative father. Residing somewhere in [REDACTED] County, TN

Mother: [REDACTED]  
Father: [REDACTED] is currently incarcerated at [REDACTED] County jail on 1 count of aggravated child abuse and 1 count of child abuse and neglect

Child not placed into custody-

Mother: [REDACTED]  
Father- Unknown, but is reported to be deceased.  
Child is currently at Children's Hospital in the PICU. Child is on Life support and is not expected to survive.

Children placed into protective custody on 8/26/2014 @ approx.. 3:15pm at [REDACTED] Elementary located at [REDACTED]  
[REDACTED], TN. The family had been residing at the [REDACTED] Room  
[REDACTED] for approximately at week and a half.

**CPS History:**

6/11/2012 Resource Linkage case with the concerns being environmental neglect issues.  
9/15/2013 Physical abuse with [REDACTED] being the alleged perpetrator and [REDACTED] being the alleged victim. Case was closed as allegation unsubstantiated and perpetrator unsubstantiated.  
9/25/2013 Physical abuse with [REDACTED] being the alleged perpetrator and [REDACTED] and [REDACTED] being the alleged victims. Case was closed an allegation unsubstantiated and perpetrator unsubstantiated.  
7/24/2014 Lack of supervision with the alleged perpetrator being the mother, [REDACTED]. The alleged victims were [REDACTED] and [REDACTED] Case closed as no services needed.



**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Current referral states:**

[REDACTED] (3) and unknown child (age 1 or under) live with their father, [REDACTED]. The family is staying at an unknown room number at the [REDACTED] or [REDACTED]. It is unknown if anyone else stays in the room. [REDACTED] is not in DCS custody.

Today, the [REDACTED] Police Department received a call from [REDACTED] Hospital. [REDACTED] took [REDACTED] to the hospital this morning and she was unconscious. [REDACTED] said that [REDACTED] had tripped on a flip flop while going downstairs and fell. [REDACTED] didn't have a heartbeat for several minutes. [REDACTED] was resuscitated. [REDACTED] left eye is black and the tops of both ears are black and blue. [REDACTED] has not yet been evaluated for further injuries or fractures. Hospital personnel believe that the injuries are suspicious.

[REDACTED] is in route to [REDACTED] Hospital to be treated. It is unknown at this point if [REDACTED] is in stable condition. [REDACTED] is with [REDACTED] and he has the other child with him. The mother (name unknown) is at work and is supposed to be on her way to the hospital.

Law enforcement is requesting an immediate call back from a CPS investigator.

**Current Concerns:**

[REDACTED] was admitted to Children's hospital on 8/26/2014 with no pulse. She was revived after being shocked to get a heart rate back. It is unclear how long she was without a pulse. But was reported that when she arrived at [REDACTED] that she had not pulse and an ambulance was called to transport her to Children's. CPR was done until she arrived at Children's. Upon examination it was reported that she had multiple bruises everywhere on her body. It was discovered that [REDACTED] had severe head trauma. Her eyes were reported to be fixed and dilated. [REDACTED] was reported to have been in the care of [REDACTED] and the mother was at work. The hospital reports that the injuries to [REDACTED] body are not consistent with a fall down stairs.



**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: 7/24/14 4:06 PM

Date of Assessment: 7/28/14 12:00 AM

Assessment Type: Initial

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.



**Tennessee Department of Children's Services**  
**SDM™ Safety Assessment**

**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:** \_\_\_\_\_



**Tennessee Department of Children's Services**  
**SDM™ Safety Assessment**

**Assessment**

Family Name: [REDACTED]  
 County: [REDACTED]  
 Date of Referral: 8/26/14 10:26 AM  
 Assessment Type: Initial

TN DCS Intake ID #: [REDACTED]  
 Worker: [REDACTED]  
 Date of Assessment: 8/27/14 12:00 AM  
 Number of Children in the Household: 3

**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.

