



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 09/04/2014 12:08 AM CT
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 09/04/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 09/04/2014 08:57 AM
 First Team Leader Assigned: [REDACTED] Date/Time 09/04/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 09/04/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
Unknown Participant [REDACTED], Unknown	11 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother

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: Possible history under [REDACTED]
 Family Case IDs: [REDACTED]
 Open Court Custody/FSS/FCIP: No
 Closed Court Custody: No
 Open CPS: No
 Substantiated: No
 Death: No



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Screened out: No

History (not listed above): Yes

11-28-11 [REDACTED] DEC - No Services Needed

SSMS: Not available to the case manager at the time of the history search.

DUPLICATE REFERRAL: No

County: [REDACTED]

Notification: Email to [REDACTED]

School/ Daycare: [REDACTED]

Native American Descent: No

Directions: None given

Reporter's name/relationship: [REDACTED] [REDACTED]

Reporter states: the police were called to the home for a medical call at 6:59pm on September 3, 2014 at the home of [REDACTED]. The police were told that there was a woman on the floor, naked from the waist down, passed out, with blood on the floor. When the police arrived, [REDACTED] had regained consciousness and was able to answer questions. The police asked her basic medical questions. She was asked if she had any medical conditions and she said no. The reporter asked her what led up to her collapsing in the home. She said that she felt lightheaded and went to the bathroom and passed out. She did not mention being pregnant or giving birth. EMS performed triage on her at the home and transported her to [REDACTED]. The police and EMS left the scene.

The maternal grandmother's boyfriend, [REDACTED] (last name unknown), went to the home and examined the scene. The police were notified at approximately 9 pm that [REDACTED] found a deceased infant at the home while cleaning up. He went to the hospital and got a bag. He went back to the home and got the infant, who was found under a pile of clothing in the mother's bedroom. He took the infant to the hospital in the bag. Police went to the hospital and the reporter stayed at the home. The child's mother has been in surgery after losing a great deal of blood. [REDACTED] has two older children; [REDACTED] (6) and [REDACTED] (4). [REDACTED] was in her grandmother's room playing a game. The police believe [REDACTED] was in her mother's bedroom at the time. The police do not know where the mother gave birth. Due to the amount of blood in the bathroom, it is believed that the mother gave birth in the bathroom. It is unknown how the baby got to the bedroom and under the pile of clothing. The child appears to be full term.

According to the police, family members did not know [REDACTED] was pregnant. [REDACTED] brother, [REDACTED] said he suspected his sister might be pregnant. The family lives in the home of the grandmother, [REDACTED]. [REDACTED] older children are at the home with [REDACTED]. The deceased infant is at [REDACTED], unless the coroner has removed the body from the hospital. The police have requested that the on call worker for [REDACTED] contact [REDACTED] of the [REDACTED] Police Department regarding the older children. He can be reached at [REDACTED].

Special Needs or Disabilities: None reported

Child's current location/is the child safe at this time: older children with uncle, [REDACTED]

Perpetrator's location at this time: at [REDACTED] in [REDACTED]

Any other safety concerns for the child(ren) or worker who may respond: None

Per SDM: Investigative Track, P2, Override to a P1 for a Neglect Death and a request for assistance from law enforcement. [REDACTED], CM 2 on September 4, 2014 at 1:01am.



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Recipients	Time Issued	Response Received	Devices	Responses	
[REDACTED]	09-04-14 01:32:14 AM CDT	09-04-14 01:33:51 AM CDT			+ [REDACTED] Received
	09-04-14 01:32:15 AM CDT	---	[REDACTED]		

Email Sent

Email notification sent to EI DCS Child Death or Preliminary Death Alert and RA [REDACTED]. Email notification also sent to [REDACTED] notification group on 09-04-14 @ 01:35am, [REDACTED], TL



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

Participant(s)

Name: [REDACTED]

Gender: Female

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race: Black/African

Age: 55 Yrs (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: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** Black/African **Age:** 7 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: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** Black/African **Age:** 29 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: [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race: Black/African

Age: 27 Yrs (Est)

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: Unknown Participant [REDACTED], Unknown

Gender: Female

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

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

Age: 11 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: HOME

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:

Participant ID: [REDACTED]

SSN:

Race: Black/African

Age: 4 Yrs (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
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 09/04/2014

Assignment Date: 10/08/2014

Street Address:

City/State/Zip:

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]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 10/09/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: The case will be closed and classified as Allegation Substantiated Perpetrator Substantiated for the allegation of Child Neglect Death.

D. Case Workers

Case Worker: [REDACTED]

Date: 10/09/2014

Team Leader: [REDACTED]

Date: 10/09/2014

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:

The children, [REDACTED], were interviewed at the Child Advocacy Center. [REDACTED] disclosed that she was in the bedroom with [REDACTED]. [REDACTED] stated that [REDACTED] was in the bathroom and it was messy. [REDACTED] stated that she saw a black bag and [REDACTED] attempting to throw something away. [REDACTED] disclosed that she was in her grandmother's room during the incident in question. She stated that [REDACTED] was in [REDACTED] room. She stated that her Uncle came and woke her grandmother, [REDACTED]. He told her not to go into [REDACTED] room because there was blood everywhere. [REDACTED] stated that her uncle said that [REDACTED] stomach was bleeding.

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

The Department received a copy of the Medical Examiner's Autopsy report. The official cause of death is Could Not be Determined. The Assistant Medical Examiner [REDACTED] stated that this appears to have been a live birth. The circumstances under which the infant was found suggest it is highly likely this is a suffocation death, although hypothermia is also a possibility.



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

Case Name : ██████████

Investigation ID: ██████████

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

CPSI ██████ interviewed ██████ the following day. ██████ stated that she knew she was pregnant and did not tell anyone else about her condition. ██████ stated that she knew she was giving birth inside her home and heard a cry and wrapped the infant in a shirt before passing out from loss of blood. ██████ stated that she regained consciousness and went into the bathroom adjoining her room. ██████ stated that she then passed out again and woke up at ██████. ██████ stated that she did not know why ██████ returned to the home to look for and find an infant underneath a pile of clothing. ██████ stated that she has lived in the home with her adult brothers and her mother ██████ for about 4 years. Later in the case CPSI ██████ interviewed ██████. CPSI ██████ asked ██████ what her daily routine was like before DCS involvement. ██████ stated that she would wake up around 5:00am and take her brother to work. She stated that she would come back home and get her children ready for school. While the children were at school she would run errands, before going to work. ██████ reported that she no longer works at ██████ CPSI ██████ asked if ██████ received any prenatal care during her pregnancy. ██████ stated that she did not due to not having insurance. CPSI ██████ asked about her giving birth at home. ██████ stated that she had planned to call the ambulance when she went into labor; however, she kept passing out.

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

the police were called to the home for a medical call at 6:59pm on September 3, 2014 at the home of ██████. The police were told that there was a woman on the floor, naked from the waist down, passed out, with blood on the floor. When the police arrived, ██████ had regained consciousness and was able to answer questions. The police asked her basic medical questions. She was asked if she had any medical conditions and she said no. The reporter asked her what led up to her collapsing in the home. She said that she felt lightheaded and went to the bathroom and passed out. She did not mention being pregnant or giving birth. EMS performed triage on her at the home and transported her to ██████. The police and EMS left the scene.

The maternal grandmother's boyfriend, ██████ (last name unknown), went to the home and examined the scene. The police were notified at approximately 9 pm that ██████ found a deceased infant at the home while cleaning up. He went to the hospital and got a bag. He went back to the home and got the infant, who was found under a pile of clothing in the mother's bedroom. He took the infant to the hospital in the bag. Police went to the hospital and the reporter stayed at the home. The child's mother has been in surgery after losing a great deal of blood. ██████ has two older children; ██████ (6) and ██████ (4). ██████ was in her grandmother's room playing a game. The police believe ██████ was in her mother's bedroom at the time. The police do not know where the mother gave birth. Due to the amount of blood in the bathroom, it is believed that the mother gave birth in the bathroom. It is unknown how the baby got to the bedroom and under the pile of clothing. The child appears to be full term.

According to the police, family members did not know ██████ was pregnant. ██████, ██████ brother, said he suspected his sister might be pregnant. The family lives in the home of the grandmother, ██████. ██████ older children are at the home with ██████. The deceased infant is at ██████, unless the coroner has removed the body from the hospital. The police have requested that the on call worker for ██████ contact ██████ of the ██████ Police Department regarding the older children. He can be reached at ██████.

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

Due to the autopsy report and what ██████ reported it is believed that the infant was a live birth and the death was caused by neglect/abuse.

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



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]



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: 04/30/2015

Contact Method:

Contact Time: 07:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/30/2015

Completed date: 04/30/2015

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: 04/30/2015 07:17 PM Entered By: [REDACTED]

IC [REDACTED] received permission from the RID & Deputy Director of Investigations to close the case.



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: 04/06/2015

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/21/2015

Completed date: 04/21/2015

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: 04/21/2015 10:57 AM Entered By: [REDACTED]

Case has been submitted for review.



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: 03/06/2015

Contact Method:

Contact Time: 03:10 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/06/2015

Completed date: 03/06/2015

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: 03/06/2015 03:11 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] is awaiting for the case to be reviewed.



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: 02/10/2015

Contact Method:

Contact Time: 08:51 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/10/2015

Completed date: 02/10/2015

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: 02/10/2015 08:52 AM Entered By: [REDACTED]

Case Conference

LI [REDACTED] reviewed the monthly face to face contact with the siblings in the system documented by FSW [REDACTED]. FSW [REDACTED] is assigned to the case and is seeing the children every month.



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: 01/13/2015

Contact Method:

Contact Time: 03:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/14/2015

Completed date: 01/14/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

[REDACTED] Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

[REDACTED]

Narrative Type: Original Entry Date/Time: 01/14/2015 10:29 AM Entered By: [REDACTED]

[REDACTED] was indicted and arrested for felony murder, aggravated child abuse, and aggravated child neglect on 1/12/2014.



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: 01/12/2015

Contact Method: Correspondence

Contact Time: 05:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/14/2015

Completed date: 01/14/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notification of Classification

Contact Sub Type: Letter A - Notice of Indication to Perpetrator

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

Narrative Type: Original Entry Date/Time: 01/14/2015 10:23 AM Entered By: [REDACTED]

The notice of indication to perpetrator was able to be sent to [REDACTED]. The department was unaware of her location to send it previously.

Narrative Type: Addendum 1 Entry Date/Time: 04/30/2015 02:06 PM Entered By: [REDACTED]

This CPSI emailed the Substantiated Perpetrator Letter A and attachment was completed and due process is initiated.



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: 01/12/2015

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/06/2015

Completed date: 03/06/2015

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: 03/06/2015 03:10 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] conducted a case conference on this date with Investigator [REDACTED] [REDACTED] was indicted and arrested for felony murder, aggravated child abuse, and aggravated child neglect on 1/12/2014. Case submitted for review.



**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:	01/06/2015	Contact Method:	
Contact Time:	06:57 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	12/26/2014
Completed date:	01/06/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 12/26/2014 04:39 PM Entered By: [REDACTED]

The Department of Children's Services (DCS) Investigations Unit received a referral on 09/04/2014 with an allegation of Child Neglect Death regarding non-custodial child [REDACTED]. There has been no previous history with DCS.

09/04/2014, EMS received a call from [REDACTED] stating that his sister, [REDACTED] was found passed out covered in blood. EMS responded and found [REDACTED] sitting on the bathroom floor. Paramedics noted blood on the bathroom floor and vaginal bleeding. Paramedics stated that [REDACTED] was only able to answer yes or no questions by nodding her head. [REDACTED] was asked by paramedics if she had a miscarriage, passed anything vaginally, or was pregnant. [REDACTED] replied no to all questions. Later, when asked about being pregnant again, [REDACTED] replied, "maybe." Paramedics stated there was nothing that was obvious at the short time they were on the scene that suggested that [REDACTED] had delivered a baby. [REDACTED] was transported to [REDACTED] in [REDACTED]; [REDACTED] mother accompanied her to the hospital. [REDACTED] received a phone call from her paramour [REDACTED], who stated that a baby was found in the home. [REDACTED] informed the hospital staff of this information and staff provided her with a bio-hazard bag to collect the infant. [REDACTED] retrieved the bag and went back to the residence and placed the deceased infant inside of the bag. [REDACTED] then brought the infant to the hospital where she was examined and pronounced deceased. [REDACTED] was pronounced deceased at 8:30 pm on 09/03/2014.

The investigation into this incident was conducted by The [REDACTED] Police Department [REDACTED], DCS Investigations Unit Lead Investigator [REDACTED] and Investigators [REDACTED] and [REDACTED].

The report to DCS listed the mother [REDACTED] as the alleged perpetrator of Child Neglect Death. Numerous interviews were conducted of family and medical professionals.

As part of the investigation, all family members were interviewed. CPSI [REDACTED] interviewed [REDACTED] the following day. [REDACTED] stated that she knew she was pregnant and did not tell anyone else about her condition. [REDACTED] stated that she knew she was giving birth inside her home and heard a cry and wrapped the infant in a shirt before passing out from loss of blood. [REDACTED] stated that she regained consciousness and went into the bathroom adjoining her room. [REDACTED] stated that she then passed out again and woke up at [REDACTED]. [REDACTED] stated that she did not know why [REDACTED] returned to the home to look for and find an infant underneath



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

a pile of clothing. [REDACTED] stated that she has lived in the home with her adult brothers and her mother [REDACTED] for about 4 years. Later in the case CPSI [REDACTED] interviewed [REDACTED]. CPSI [REDACTED] asked [REDACTED] what her daily routine was like before DCS involvement. [REDACTED] stated that she would wake up around 5:00am and take her brother to work. She stated that she would come back home and get her children ready for school. While the children were at school she would run errands, before going to work. [REDACTED] reported that she no longer works at [REDACTED]. CPSI [REDACTED] asked if [REDACTED] received any prenatal care during her pregnancy. [REDACTED] stated that she did not due to not having insurance. CPSI [REDACTED] asked about her giving birth at home. [REDACTED] stated that she had planned to call the ambulance when she went into labor; however, she kept passing out.

CPSI [REDACTED] interviewed the family. [REDACTED] stated that she was asleep in her own bedroom at the other end of the home. [REDACTED] stated that she was awakened when her adult son [REDACTED] yelled that something was wrong with [REDACTED] in her bathroom. [REDACTED] stated that she did not enter the room because [REDACTED] told her there was a lot of blood on the floor. [REDACTED] followed the ambulance to [REDACTED]. [REDACTED] stated that her adult son [REDACTED] called and told her "I see a hand underneath a pile of clothes." [REDACTED] stated that she informed hospital staff and was told the hospital would supply a bio-hazard bag for the fetus. [REDACTED] stated that she inquired whether police or medical personnel should be responsible for collecting the infant. [REDACTED] stated that hospital staff told her that there was no need for professional personnel to collect the infant. [REDACTED] stated that she called her paramour [REDACTED] and asked him to retrieve the bio-hazard bag from the hospital and return to the home.

[REDACTED] stated that he went to the home and saw the infant underneath the clothing pile on the floor. [REDACTED] stated that [REDACTED] held the bio-hazard bag open while [REDACTED] placed the infant inside the bag. [REDACTED] stated he placed the bio-hazard inside another plastic bag and transported the infant to [REDACTED]. [REDACTED] stated that he heard moans and grunting coming from [REDACTED] bathroom. [REDACTED] stated that he found [REDACTED] passed out on the toilet. [REDACTED] stated that he attempted to revive [REDACTED] by holding her around the waist. [REDACTED] stated that his brother [REDACTED] called 911 for assistance. When [REDACTED] was transported to [REDACTED] [REDACTED] started to clean up blood on the floor when [REDACTED] saw a small hand underneath a clothing pile on the floor of the bedroom. [REDACTED] stated that [REDACTED] then called [REDACTED] at [REDACTED] to inform her.

[REDACTED] stated that he was asleep in the home when he heard [REDACTED] shouting that something was wrong with [REDACTED]. [REDACTED] stated that he saw [REDACTED] holding [REDACTED] by the waist and trying to revive her. [REDACTED] stated that he called 911 and Police were the first on the scene. [REDACTED] stated that a fire department truck and then an ambulance arrived at the home. [REDACTED] stated that he observed a hand underneath a pile of clothing on the floor and called his mother [REDACTED] at [REDACTED].

The children, [REDACTED], were interviewed at the Child Advocacy Center. [REDACTED] disclosed that she was in the bedroom with [REDACTED]. [REDACTED] stated that [REDACTED] was in the bathroom and it was messy. [REDACTED] stated that she saw a black bag and [REDACTED] attempting to throw something away. [REDACTED] disclosed that she was in her grandmother's room during the incident in question. She stated that [REDACTED] was in [REDACTED] room. She stated that her Uncle came and woke her grandmother, [REDACTED]. He told her not to go into [REDACTED] room because there was blood everywhere. [REDACTED] stated that her uncle said that [REDACTED] stomach was bleeding.

The Department received a copy of the Medical Examiner's Autopsy report. The official cause of death is Could Not be Determined. The Assistant Medical Examiner [REDACTED] stated that this appears to have been a live birth. The circumstances under which the infant was found suggest it is highly likely this is a suffocation death, although hypothermia is also a possibility.

DCS policy Work Aid 1 (E) defines the following criteria for Child Neglect Death:

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.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

The case was presented to the [REDACTED] [REDACTED] Child Protective Investigation Team on 10/22/2014. Team members were in agreement that there was sufficient evidence to substantiate the allegation of Child Neglect Death. The Team members also agreed that this case would be referred for prosecution.

There is a preponderance of evidence to substantiate the allegation of Child Neglect Death.

The case will be closed and classified as Allegation Substantiated Perpetrator Substantiated for the allegation of Child Neglect Death.

Narrative Type: Addendum 1 Entry Date/Time: 04/30/2015 02:02 PM Entered By: [REDACTED]

Notification of referral was sent to the Judge. Notification of this referral was sent to the District 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:	Created In Error
Contact Date:	01/06/2015	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	03/06/2015
Completed date:	03/06/2015	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: 03/06/2015 03:08 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] conducted a case conference on this date with Investigator [REDACTED] [REDACTED] was indicted and arrested for felony murder, aggravated child abuse, and aggravated child neglect on 1/12/2014. Case submitted for review.

Narrative Type: Created In Error Entry Date/Time: 03/06/2015 03:09 PM Entered By: [REDACTED]

wrong date it needs to be dated 1/12/2015



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: 12/15/2014

Contact Method:

Contact Time: 03:23 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/26/2014

Completed date: 12/26/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/26/2014 03:08 PM Entered By: [REDACTED]

CPSI [REDACTED] received a phone call from [REDACTED]. He stated that [REDACTED] was no longer living at the address CPSI [REDACTED] visited her at. He stated that he spoke with the lady that lived there and she stated that [REDACTED] had not resided there since CPSI [REDACTED] visited her there. CPSI [REDACTED] informed [REDACTED] that she would inform FSW of this and attempt to locate [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: 12/08/2014

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/26/2014

Completed date: 12/26/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/26/2014 02:50 PM Entered By: [REDACTED]

CPSI [REDACTED] received the autopsy report from the Medical Examiner's Office. The official cause of death is Could Not be Determined. The Assistant Medical Examiner [REDACTED] stated that this appears to have been a live birth. The circumstances under which the infant was found suggest it is highly likely this is a suffocation death, although hypothermia is also a possibility.



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: 12/05/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/06/2015

Completed date: 03/06/2015

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: 03/06/2015 03:06 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] conducted a case conference on this date with [REDACTED]

Next Step: await autopsy,



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: 11/13/2014

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 11/13/2014

Completed date: 11/13/2014

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: 11/13/2014 03:15 PM Entered By: [REDACTED]

A CFTM Transfer meeting was conducted on this day.

[REDACTED], her attorney [REDACTED], CPSI [REDACTED] LI [REDACTED] TL [REDACTED] and FSW [REDACTED] were present. [REDACTED], [REDACTED] participated by phone.

In this meeting a new IPA was completed allowing [REDACTED] to have supervised therapeutic visitation.



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: 11/13/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/13/2015

Completed date: 01/13/2015

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: 01/13/2015 09:58 AM Entered By: [REDACTED]

CPSI [REDACTED] completed the FFA and FAST assessments. The FAST showed that there was a moderate level of services was needed. The assessments will be placed 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: 11/12/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/06/2015

Completed date: 03/06/2015

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: 03/06/2015 03:04 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] conducted a case conference on this date with [REDACTED].

Next Steps: follow up with the mother, contact the father, present to CPIT, follow up with services,



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: 11/06/2014

Contact Method: Face To Face

Contact Time: 10:35 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 11/13/2014

Completed date: 11/13/2014

Completed By: [REDACTED]

Purpose(s): Permanency, Well Being

Contact Type(s): Court Hearing, Alleged Perpetrator Interview, Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/13/2014 12:28 PM Entered By: [REDACTED]

This case was reset for January 26, 2015. [REDACTED] attorney is [REDACTED] and the GAL is [REDACTED].

Narrative Type: Addendum 1 Entry Date/Time: 01/13/2015 09:36 AM Entered By: [REDACTED]

This was the first appearance for the IPA. Only one petition was filed at this time for [REDACTED]. [REDACTED] petition had not been filed at that time. Therefore the case was reset for January 26, 2015. At that time there will be the first appearance for the IPA. Present was [REDACTED] and her atty, [REDACTED] and GAL, and [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:	11/03/2014	Contact Method:	Phone Call
Contact Time:	11:39 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	12/26/2014
Completed date:	12/26/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/26/2014 03:18 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted [REDACTED], [REDACTED] father to inform him of the case. CPSI [REDACTED] explained that there was an open investigation in regards to a baby that was born. [REDACTED] was concerned if his child was alright. CPSI [REDACTED] explained that currently his child has been placed with [REDACTED] and she was fine. CPSI [REDACTED] explained that there was a no contact order in place for [REDACTED] and that he abide by that during his visitation with [REDACTED]. [REDACTED] stated that he would and that he did not contact [REDACTED] anyways. CPSI [REDACTED] explained to [REDACTED] that there was court involvement through the juvenile court and that he needed to be present. CPSI [REDACTED] informed [REDACTED] of the up coming court date and explained that he was not being restricted from his visitations with [REDACTED]. [REDACTED] stated that he would be at the next court date.



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:	10/22/2014	Contact Method:	Face To Face
Contact Time:	02:00 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/13/2014
Completed date:	11/13/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 11/13/2014 10:52 AM Entered By: [REDACTED]

This case was presented at the Child Protective Investigative Team (CPIT) meeting and everyone agreed to close as Allegation Substantiated Perpetrator Substantiated. The team also agreed to refer this case for prosecution. The form was completed and located 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:	10/20/2014	Contact Method:	Face To Face
Contact Time:	08:40 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	11/13/2014
Completed date:	11/13/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Alleged Perpetrator Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/13/2014 12:25 PM Entered By: [REDACTED]

CPSI [REDACTED] conducted a face to face visit with [REDACTED] to follow up with her about the case. CPSI [REDACTED] was invited in by [REDACTED]

CPSI [REDACTED] explained to [REDACTED] that she would be the new investigator on the case. CPSI [REDACTED] explained the permanency plan to [REDACTED] so that she would know what was expected from her by the department. CPSI [REDACTED] gave [REDACTED] a resource list to set up her clinical evaluation. [REDACTED] stated that she would be getting a new job working at [REDACTED] and would be able to carry [REDACTED] on her health insurance.

CPSI [REDACTED] asked [REDACTED] what her daily routine was like before DCS involvement. [REDACTED] stated that she would wake up around 5:00am and take her brother to work. She stated that she would come back home and get her children ready for school. While the children were at school she would run errands, before going to work. [REDACTED] reported that she no longer works at [REDACTED]. CPSI [REDACTED] asked if [REDACTED] received any prenatal care during her pregnancy. [REDACTED] stated that she did not due to not having insurance. CPSI [REDACTED] asked about her giving birth at home. [REDACTED] stated that she had planned to call the ambulance when she went into labor; however, she kept passing out.

CPSI [REDACTED] observed [REDACTED] to be calm and unemotional during the interview. [REDACTED] was very matter of fact when answering questions.

CPSI [REDACTED] asked [REDACTED] about the children's fathers. [REDACTED] would not report who was the father of [REDACTED]. [REDACTED] stated that [REDACTED] father's last known address was in another state. She reported that she had not seen him in years. [REDACTED] stated that [REDACTED] was [REDACTED] father. She stated that [REDACTED] pays child support when he wants to. She stated that he has court ordered visitation for every other week, however when she started school they decided to make it every other weekend instead. CPSI [REDACTED] asked about [REDACTED] social security card and [REDACTED] stated that it was supposed to be coming in the mail any day now.

CPSI [REDACTED] asked if [REDACTED] had any questions regarding anything and [REDACTED] stated that she did not.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 01/13/2015 09:49 AM Entered By: [REDACTED]

The NCPP was completed and signed at this time.

The plan stated:

[REDACTED] needed to complete a mental health assessment to determine her mental health status and follow all recommendations. [REDACTED] will cooperate with DCS and Law enforcement.

[REDACTED] will complete grief counseling to cope with the loss of a sibling and therapy to cope with the loss of contact with their mother.

CPSI [REDACTED] asked [REDACTED] if she felt anything else needed to be added to the plan and she did not.



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: 10/10/2014

Contact Method:

Contact Time: 01:39 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/10/2014

Completed date: 10/10/2014

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: 10/10/2014 01:54 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] conducted a case conference on this date with [REDACTED]. [REDACTED] received this case as a transfer from [REDACTED]. [REDACTED] conducted a follow up home visit with the family. The children reported that everything was going fine. The children didn't mention anything about their mother. The maternal grandmother reported that the children haven't had any contact with their mother and haven't asked about her. The grandmother had a lot of unanswered questions and the investigator was able to answer them. Investigator discussed the perm plan with the grandmother and provided resources for the family.

Next Steps: follow up with the mother, contact the father, present to CPIT, follow up with services,



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:	10/10/2014	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	11/13/2014
Completed date:	11/13/2014	Completed By:	[REDACTED]
Purpose(s):	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: 11/13/2014 11:29 AM Entered By: [REDACTED]

CPSI [REDACTED] conducted a face to face visit at the family home to follow up with the family and to introduce herself to the family. CPSI [REDACTED] obtained permission to enter the home from [REDACTED]. At the time of the visit [REDACTED], [REDACTED] were present.

[REDACTED] were in the kitchen playing with a dollhouse. CPSI [REDACTED] introduced herself to the children. Both children appeared to be healthy and happy. CPSI [REDACTED] observed no visible marks or bruises on the children. CPSI [REDACTED] asked the children how they were doing and both replied that they were fine, and that they were enjoying fall break.

CPSI [REDACTED] spoke with [REDACTED] in the living room of the home. CPSI [REDACTED] explained that she would be taking over the case until it is transferred to long term. CPSI [REDACTED] explained that there was a permanency plan that was established. [REDACTED] stated that she was unaware of any plan. CPSI [REDACTED] went over the permanency plan with [REDACTED] and gave her a list of resource for grief therapy. CPSI [REDACTED] asked [REDACTED] if she has noticed any changes in the children's behaviors, and how they were adjusting without their mother around. [REDACTED] stated that the children had not even asked about their mother. She stated that [REDACTED] was sad when it first happened and she often had questions about what had happened. [REDACTED] stated that the girls would wake up sad when it first happened but they appear to be fine now.

[REDACTED] had questions regarding the children. She stated that [REDACTED] does not have insurance. She stated that her father [REDACTED] was caring her on his insurance, but when she got sick recently the doctor informed her that [REDACTED] did not have insurance. CPSI [REDACTED] stated that she would ask [REDACTED] about this. [REDACTED] also stated that [REDACTED] is supposed to have court ordered visitation every other weekend, however she had not heard from him. CPSI [REDACTED] informed [REDACTED] that the department has no allegations against [REDACTED] and would inquire his contact information so that he could be informed about the department's involvement. [REDACTED] also asked about the children's social security cards. She stated that she did not have them in her possession.

Upon getting ready to leave the home, [REDACTED] asked CPSI [REDACTED] what was going to happen next. CPSI [REDACTED] explained the next steps to [REDACTED] regarding Juvenile court. [REDACTED] then inquired about the criminal investigation. CPSI [REDACTED] informed her that the investigation was ongoing and no new information was available.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPSI [REDACTED] observed the home to be clean and free from any safety concerns.

This CPSI completed the closing Safety Assessment. There are current immediate harm factors and interventions. Death of a child due to abuse or neglect

The safety intervention is: Have the alleged perpetrator leave the home, either voluntarily or in response to legal action.

The safety decision is: 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.



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:	10/09/2014	Contact Method:	Attempted Phone Call
Contact Time:	11:33 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/09/2014
Completed date:	10/09/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/09/2014 12:41 PM Entered By: [REDACTED]

CPSI [REDACTED] called [REDACTED] to inform her that CPSI would be taking over as the Investigator on the case. CPSI [REDACTED] received the voicemail, and left a message explaining that CPSI [REDACTED] needed to schedule a home visit to meet the children.



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: 09/06/2014

Contact Method:

Contact Time: 12:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/06/2014

Completed date: 09/06/2014

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: 09/06/2014 12:33 PM Entered By: [REDACTED]

Child Protective Services [REDACTED] (CPSI) completed the initial Safety Assessment. The safety decision is: 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.



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:	System Completed
Contact Date:	09/06/2014	Contact Method:	Correspondence
Contact Time:	12:30 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/06/2014
Completed date:	10/07/2014	Completed By:	System Completed
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notification of Classification		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/06/2014 01:10 PM Entered By: [REDACTED]

Child Protective Services [REDACTED] (CPSI) entered the classification into the classification tab in TFACTS. The classification is Allegation Substantiated/Perp Substantiated based on [REDACTED] stating that she knew she was pregnant and then not admitting that fact to other family members when they inquired about her possibly being pregnant. [REDACTED] stated that she heard the infant cry after birth and then wrapped the infant in a shirt.

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.



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:	System Completed
Contact Date:	09/06/2014	Contact Method:	
Contact Time:	12:04 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/06/2014
Completed date:	10/07/2014	Completed By:	System Completed
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/06/2014 12:06 PM Entered By: [REDACTED]
 Child Protective Services [REDACTED] (CPSI) received the records check from the [REDACTED] Sheriff's Department

This CPSI completed checks on all perpetrators at the following websites:
 TN Sex Offender - negative
 National Sex Offender - negative
 TN Felony Offender - negative
 Out of State Probation Registry - negative
 TN Meth Offender - negative
 Abuse Registry - negative



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:	09/04/2014	Contact Method:	Face To Face
Contact Time:	05:30 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	12/26/2014
Completed date:	12/26/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Well Being		
Contact Type(s):	Sibling Interview/Observation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 12/26/2014 04:03 PM Entered By: [REDACTED]

The children, [REDACTED], were interviewed at the Child Advocacy Center [REDACTED] disclosed that she was in the bedroom with [REDACTED] stated that [REDACTED] was in the bathroom and it was messy. [REDACTED] stated that she saw a black bag and [REDACTED] attempting to throw something away. [REDACTED] disclosed that she was in her grandmother's room during the incident in question. She stated that [REDACTED] was in [REDACTED] room. She stated that her Uncle came and woke her grandmother, [REDACTED]. He told her not to go into [REDACTED] room because there was blood everywhere. [REDACTED] stated that her uncle said that [REDACTED] stomach was bleeding.

Narrative Type: Addendum 1 Entry Date/Time: 12/26/2014 04:03 PM Entered By: [REDACTED]

A copy of the complete interview will be placed 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: 09/04/2014

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/10/2014

Completed date: 10/10/2014

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: 10/10/2014 01:15 PM Entered By: [REDACTED]

Case Conference

LI [REDACTED] conducted a case conference on this date with [REDACTED]. [REDACTED] was assigned to this case on 9/4/2014 as a P1 Neglect Death. The victim is unknown and the alleged perp is [REDACTED] (mother). [REDACTED] was unable to meet response due to the victim being deceased. Investigator went to the residence to meet with the family. The siblings were interviewed, grandmother, uncles, and grandmother's boyfriend. It was determined during the investigation that the children needed to be safety placed/IPA needed to be put into place. [REDACTED] met with LI [REDACTED] as MSW consult on the case. LI [REDACTED] spoke with legal and IC regarding approval of an IPA. The siblings were safety placed with the maternal grandmother and the mother is not to having any contact with the children. [REDACTED] did go to the resident where the mother is residing. [REDACTED] conducted a walk through of the maternal grandmother's home and completed all checks on the adults residing in the home. [REDACTED] completed the child fatality form and entered the victim as deceased in the system.

Next Steps: follow up with family, identify services, locate father's, complete affidavit



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: 09/04/2014 Contact Method: Face To Face
 Contact Time: 04:00 PM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/06/2014
 Completed date: 09/06/2014 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community

[REDACTED] Other Persons Living in Home Interview/Observation

Contact Sub Type:

Children Concerning**Participant(s)**

Narrative Type: Original Entry Date/Time: 09/06/2014 01:48 PM Entered By: [REDACTED]

[REDACTED], maternal grandmother stated that she was asleep in her own bedroom at the other end of the home. [REDACTED] stated that she was awakened when her adult son [REDACTED] yelled that something was wrong with [REDACTED] in her bathroom. [REDACTED] stated that she did not enter the room and because [REDACTED] told her there was a lot of blood on the floor. [REDACTED] followed the ambulance to [REDACTED] [REDACTED] stated that her adult son [REDACTED] called and told her "I see a hand underneath a pile of clothes." [REDACTED] stated that she informed hospital staff and was told the hospital would supply a bio-hazard bag for the fetus. [REDACTED] stated that she inquired whether police or medical personnel should be responsible for collecting the infant. [REDACTED] stated that hospital staff told her that there was no need for professional personnel to collect the infant. [REDACTED] stated that she called her paramour [REDACTED] and asked him to retrieve the bio-hazard bag from the hospital and return to the home.

[REDACTED] stated that he went to the home and saw the infant underneath the clothing pile on the floor. [REDACTED] stated that [REDACTED] held the bio-hazard bag open while [REDACTED] placed the infant inside the bag. [REDACTED] stated he placed the bio-hazard inside another plastic bag and transported the infant to [REDACTED].

[REDACTED] stated that he heard moans and grunting coming from [REDACTED] bathroom. [REDACTED] stated that he found [REDACTED] passed out on the toilet. [REDACTED] stated that he attempted to revive [REDACTED] by holding her around the waist. [REDACTED] stated that his brother [REDACTED] called 911 for assistance. When [REDACTED] was transported to [REDACTED] cleaned up blood on floor and [REDACTED] saw a small hand underneath a clothing pile on the floor of the bedroom. [REDACTED] stated that [REDACTED] then called [REDACTED] at [REDACTED] to inform her.

[REDACTED] stated that he was asleep in the home when he heard [REDACTED] shouting that something was wrong with [REDACTED] stated that he saw [REDACTED] holding [REDACTED] by the waist and trying to revive her. [REDACTED] stated that he called 911 and [REDACTED] Police were the first on the scene. [REDACTED] stated that a fire department truck and then an ambulance arrived at the home. [REDACTED] stated that he observed a hand underneath a pile of clothing on the floor and called his mother [REDACTED] at [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:	09/04/2014	Contact Method:	Face To Face
Contact Time:	03:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	09/06/2014
Completed date:	09/06/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Sibling Interview/Observation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/06/2014 01:00 PM Entered By: [REDACTED]

Child Protective Service Investigator (CPSI) [REDACTED] completed a face to face interview with [REDACTED]. CPSI introduced himself as an Investigator for the Department of Children Services and explained the purpose and goals of the department as it relates to ensuring the safety and well-being of children. [REDACTED] stated that she likes reading and playing outside with her sister. [REDACTED] was reading a book titled "Dork Diaries" and stated it is a funny book. [REDACTED] stated that she goes to [REDACTED] and likes school, but not math. [REDACTED] stated that she feels safe in her home and gets along well with her family. [REDACTED] presented with no physical or behavioral evidence of abuse or neglect. She appeared to be dressed in clean and appropriate clothing, with appropriate hygiene. [REDACTED] appeared physically and developmentally appropriate for her age.

Child Protective Service Investigator (CPSI) [REDACTED] completed a face to face interview with [REDACTED]. CPSI introduced himself as an Investigator for the Department of Children Services and explained the purpose and goals of the department as it relates to ensuring the safety and well-being of children. [REDACTED] appeared very shy and spoke very little during interview. [REDACTED] stated that she goes to [REDACTED] and likes going to school. [REDACTED] stated that she feels safe in her home and likes to play games with her sister. [REDACTED] presented with no physical or behavioral evidence of abuse or neglect. She appeared to be dressed in clean and appropriate clothing, with appropriate hygiene. She appeared physically and developmentally appropriate for her age.



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:	09/04/2014	Contact Method:	Face To Face
Contact Time:	02:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Hospital	Created Date:	09/06/2014
Completed date:	09/06/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview, Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/06/2014 01:38 PM Entered By: [REDACTED]

In order to engage the family, CPSI explained the current report made to the Tennessee Department of Children's Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

CPSI introduced self, built rapport and explained my role in the investigation.

[REDACTED] stated that she knew she was pregnant and did not tell anyone else about her condition. [REDACTED] stated that she knew she was giving birth inside her home and heard a cry and wrapped the infant in a shirt before passing out from loss of blood. [REDACTED] stated that she regained consciousness and went into the bathroom adjoining her room. [REDACTED] stated that she then passed out again and woke up at [REDACTED]. [REDACTED] stated that she did not know why [REDACTED] returned to the home to look for and find an infant underneath a pile of clothing. [REDACTED] stated that she has lived in the home with her adult brothers and her mother [REDACTED] for about 4 years. [REDACTED] stated that [REDACTED] father is named [REDACTED] and the two share custody of the child. [REDACTED] stated that [REDACTED] used to stay with [REDACTED] every other week, but his visits are becoming more rare, about every other weekend. [REDACTED] stated that she does not know the whereabouts of [REDACTED] father, but his name is [REDACTED] and was last known to live in [REDACTED]. CPSI presented an Immediate Protection Agreement for [REDACTED] to sign stating that the children [REDACTED] would be safety placed with the maternal grandmother, [REDACTED]. CPSI explained that [REDACTED] is not to have any contact with [REDACTED] or [REDACTED] until further notice from the department. [REDACTED] stated that she would leave the family home and go live with her friend [REDACTED] at [REDACTED]. [REDACTED] stated that [REDACTED] contact number is [REDACTED].

CPSI along with the family obtained the following information regarding all family members in order to assess the family's strengths and possible needs/risk:



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Pediatrician: Siblings go to Health Dept. for care
 Are children current on Immunizations: Yes
 Mental Health: No concerns noted or reported.
 Physical Health/disability: None noted or reported.
 Medications: None reported.
 Domestic Violence: None reported.
 Alcohol/Drug Use: No concerns noted or reported.
 School Attendance/Performance: None reported.
 Department History: None found.
 Police History: None
 Employment: [REDACTED]
 Government Assistance: [REDACTED].
 Primary Caretaker history of abuse/neglect: None reported

At this time, the family feels that they are able to address all safety/permanence/well-being needs at this time.

The family identified [REDACTED] as a support.



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:	09/04/2014	Contact Method:	Correspondence
Contact Time:	11:45 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/04/2014
Completed date:	09/04/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/04/2014 11:48 AM Entered By: [REDACTED]
 Child Protective Services [REDACTED] (CPSI) e-mailed the referral to [REDACTED] P.D. in order to convene the Child Protective Investigative Team (CPIT). [REDACTED] was assigned to this investigation.



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: 09/04/2014

Contact Method: Attempted Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 10/08/2014

Completed date: 10/08/2014

Completed By: [REDACTED]

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

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/08/2014 04:37 PM Entered By: [REDACTED]

Investigator was unable to meet response due to the child being deceased.

Narrative Type: Addendum 1 Entry Date/Time: 01/13/2015 10:01 AM Entered By: [REDACTED]

CPSI completed the initial Safety Assessment. There are current immediate harm factors and interventions. Death of a child due to abuse or neglect.

The safety intervention is: have the alleged perpetrator leave the home, either voluntarily or in response to legal action.

The safety decision is: 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.



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: 09/04/2014

Contact Method: Phone Call

Contact Time: 02:15 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/06/2014

Completed date: 09/06/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/06/2014 12:46 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] of [REDACTED] P.D. [REDACTED] stated that they have been investigating the allegation since 9:00 pm on 9/3/14. [REDACTED] stated they were finished interviewing family members for the evening. [REDACTED] stated that ACV is deceased and currently scheduled for an autopsy.

Narrative Type: Addendum 1 Entry Date/Time: 01/14/2015 10:39 AM Entered By: [REDACTED]

CPSI [REDACTED] was instructed by [REDACTED] not to make contact with the family until law enforcement could be present. CPSI [REDACTED] attempted to make contact the following morning at the hospital, however was instructed that the detective would be available to accompany CPSI later that afternoon.



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: 09/04/2014

Contact Method: Phone Call

Contact Time: 01:45 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/06/2014

Completed date: 09/06/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/06/2014 11:53 AM Entered By: [REDACTED]

CPSI [REDACTED] completed a collateral contact with the referent. CPSI inquired if there were any further concerns regarding the child and there were no additional concerns reported. CPSI reported that he is the current case worker for the case and if there are any new concerns or details that come up, CPSI provided this referent with contact information for the referent to contact him.

Notification of the referral was mailed to the referent.



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:	09/04/2014	Contact Method:	
Contact Time:	12:08 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/06/2014
Completed date:	09/06/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/06/2014 11:51 AM Entered By: [REDACTED]

Child Protective Services [REDACTED] (CPSI) was assigned this case alleging Neglect Death. The perp is [REDACTED] and the victim is Unknown. It was assigned as a P1, Investigative case. The referral was assessed and assigned by TL [REDACTED]. Response is due on 9/5/14.

Referral Summary:

Reporter states: the police were called to the home for a medical call at 6:59pm on September 3, 2014 at the home of [REDACTED]. The police were told that there was a woman on the floor, naked from the waist down, passed out, with blood on the floor. When the police arrived, [REDACTED] had regained consciousness and was able to answer questions. The police asked her basic medical questions. She was asked if she had any medical conditions and she said no. The reporter asked her what led up to her collapsing in the home. She said that she felt lightheaded and went to the bathroom and passed out. She did not mention being pregnant or giving birth. EMS performed triage on her at the home and transported her to [REDACTED]. The police and EMS left the scene.

The maternal grandmother's boyfriend, [REDACTED] (last name unknown), went to the home and examined the scene. The police were notified at approximately 9 pm that [REDACTED] found a deceased infant at the home while cleaning up. He went to the hospital and got a bag. He went back to the home and got the infant, who was found under a pile of clothing in the mother's bedroom. He took the infant to the hospital in the bag. Police went to the hospital and the reporter stayed at the home. The child's mother has been in surgery after losing a great deal of blood. [REDACTED] has two older children; [REDACTED] (6) and [REDACTED] (4). [REDACTED] was in her grandmother's room playing a game. The police believe [REDACTED] was in her mother's bedroom at the time. The police do not know where the mother gave birth. Due to the amount of blood in the bathroom, it is believed that the mother gave birth in the bathroom. It is unknown how the baby got to the bedroom and under the pile of clothing. The child appears to be full term.

According to the police, family members did not know [REDACTED] was pregnant. [REDACTED] brother, said he suspected his sister might be pregnant. The family lives in the home of the grandmother, [REDACTED]. [REDACTED] older children are at the home with [REDACTED]. The deceased infant is at [REDACTED], unless the coroner has removed the body from the hospital.

This CPSI, [REDACTED], verified the family's history of involvement with DCS through a search of TFACTS and the following history was found: None



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Initial Family Composition: [REDACTED].

Notification of referral was sent to the Judge. Notification of this referral was sent to the District Attorney.



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: 9/4/14 12:08 AM

Date of Assessment: 9/5/14 12:00 AM

Assessment Type: Initial

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.



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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: _____