



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 06/25/2015 05:10 PM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 06/25/2015

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 06/25/2015 08:18 PM
 First Team Leader Assigned: [REDACTED] Date/Time 06/25/2015 08:18 PM
 First Case Manager [REDACTED] Date/Time 06/25/2015 08:18 PM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	Deceased	Abuse Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	Deceased	Abuse Death	Yes	[REDACTED]	Stepfather

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
 Referent Address: [REDACTED]
 Referent Phone Number: [REDACTED]
 Type of Contact: I-3 Phone
 Notification: None
 Narrative: Family Case IDs: [REDACTED]
 Open Court Custody/FSS/FCIP [REDACTED] / No Case Manager listed / Case Status Date: 11/17/2014, no other date listed.
 Closed Court Custody No
 Open: N/A
 Substantiated: [REDACTED] / Sexual Abuse / [REDACTED] / Allegation Substantiated / Perpetrator Substantiated / 12.15.2014
 Death: N/A
 Number of Screen Outs: 1
 History (not listed above):



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

INV / [REDACTED] / Drug Exposed Child, Lack of Supervision / Allegation Unsubstantiated / Perpetrator Unsubstantiated / 12.15.2014

INV / [REDACTED] / Lack of Supervision, Drug Exposed Child / Administrative Closure / 11.17.2014

DUPLICATE REFERRAL: No

Sex Offender Registry: N/A- Search Conducted. No hits found based on information provided.

County: [REDACTED]
Notification: None
School/ Daycare: N/A
Native American Descent: None
Directions: None Given

Is the child in custody or not? No

Reporter's name/relationship: [REDACTED]

Reporter states: [REDACTED] (15) currently resides with his father, [REDACTED] and his wife, Unknown in [REDACTED] County. It is possible that other children reside in the household, they are unknown by the reporter. The mother is [REDACTED] and her husband is [REDACTED] they reside in [REDACTED] County. [REDACTED] was not in DCS custody.

[REDACTED] was found deceased at the home of [REDACTED] and [REDACTED] around 2:33 PM this afternoon. He was found in his bedroom; as it is suspected that [REDACTED] overdosed on pills.

[REDACTED] had a history of attempting suicide. His first attempt was in November 2014, and at that time, [REDACTED] had attempted to overdose on pills. He was sent to [REDACTED] and was given a charcoal treatment, and then transferred to [REDACTED] to receive treatment for 8-10 days. [REDACTED] also attended counseling in May 2015 at [REDACTED] Medical Facility. It was reported that in May, [REDACTED] had taken his father's Percocet medication and was contemplating suicide.

[REDACTED] was not involved in counseling at the time of his death.

[REDACTED] was prescribed blood pressure medication, medication unknown by the referent. It is unknown what other medications [REDACTED] had taken prior to his death. It was reported that there were several pills available in the home when this took place. The medications were prescribed to either [REDACTED] or [REDACTED]

[REDACTED] medications include, as spelled by the reporter: Trimethoprim, Propranolol (120 mg), and Propranolol (90mg).

[REDACTED] medications include, as spelled by the reporter: Etodoiac, Gabapentin, Prazosin (X2), Cetirizine, Docusate, Dmetrazde, Lamotrigine, and Methocarbamol. The pill bottles contained anywhere from 0 to 180 pills.

[REDACTED] and [REDACTED] suspect that [REDACTED] took their medications with the intent of overdosing and killing himself. [REDACTED] was arguing with his girlfriend last night and was very broken up about it. The medications were kept in an unlocked safe in [REDACTED] and [REDACTED] bedroom closet. [REDACTED] and [REDACTED] were at home when this took place.

An autopsy will be completed in [REDACTED].

It is unknown if anyone in the house has any kind of alcohol or drug abuse or mental health issues. It is reported that [REDACTED] has severe PTSD.



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

PER SDM: Investigation Track, P1: [REDACTED] TL on 06/25/15 @ 7:30 pm

[REDACTED] notified via email

RA [REDACTED] notified via email

Recipients	Time Issued	Response Received	Devices	Responses	
[REDACTED]	06-25-15 07:34:55 PM	[REDACTED]	06-25-15 07:35:42 PM	[REDACTED]	[REDACTED]
Received	06-25-15 07:34:57 PM	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Email Sent					



**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: White Age: 45 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type: UNKNOWN

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: White Age: 41 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type: UNKNOWN

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:

Race: White

Age: Deceased

Address: [REDACTED]

Deceased Date: 06/25/2015

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: CELL

Contact Comments: Father's listed above
Mothers: [REDACTED]

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: White Age: 38 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type: UNKNOWN

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:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

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: 06/25/2015

Assignment Date: 06/26/2015

Street Address: [REDACTED]

City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Abuse Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 11/16/2015
2	[REDACTED]	[REDACTED]	Abuse Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 11/16/2015

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Allegation Unsubstantiated, Perpetrator Unsubstantiated. This classification is appropriate when:

- There is insufficient information and evidence to support the opinion that the alleged incident occurred or harmful situation existed, and
- The alleged perpetrator classified in the report was not found to be responsible for the reported maltreatment, or
- There is insufficient information and evidence to indicate the alleged perpetrator as the abuser.

D. Case Workers

Case Worker: [REDACTED]

Date: 12/09/2015

Team Leader: [REDACTED]

Date: 12/09/2015

E. Investigation Summary

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

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

Due to the circumstances the child was unable to be interviewed or observed.

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



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

Case Name : ██████████

Investigation ID: ██████████

Det. ██████ stated that he responded to a child death at around 3.00 PM. Det. ██████ stated that the adults in the home have a history of using pills, and that ██████ had access to the adult's medications. Det. ██████ stated that there were no concerns of neglect or abuse by the parents in the home.

██████ stated that the last time he interacted with his brother was on Tuesday night, while they were at separate homes while online playing games from their ██████ ██████ stated that as the two were playing the video game, that his brother appeared to be happy, and made no comments that would lead one to believe that he was thinking about ending his life, or harming himself. ██████ describes his brother as well rounded, intelligent, and was interesting in a variety of subjects. ██████ stated that he had text messaged ██████ girlfriend around 5.30 PM, and asked if she and ██████ had broken up, and she said no. ██████ then asked what time did she talk with ██████ last, and she communicated that they were talking via ██████ and she fell asleep around 11.00 PM.

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

Ms. ██████ states that on this day, that her husband when upstairs to check on ██████ and heard a scream, that made her realize that something was wrong. Ms. ██████ stated that she ran upstairs and as she ran through the door, she could see blood coming out of her sons eyes and nostrils, foam coming out of the mouth, and seen where the blood had begun to pool on his back and chest, which she described as purple in . Ms. ██████ states that ██████ slept in shorts with no shirt. Ms. ██████ states that she tried to call 911, but was fumbling with the phone, and couldn't get the number dialed. Ms. ██████ stated that she gave to telephone to her husband to call 911. Ms. ██████ states that while her husband was calling 911, she pulled her son off the bed, and attempted to give ██████ CPR. Ms. ██████ states that the police and EMS arrived around 2.00-2.30 PM. Ms. ██████ states two detectives arrived around 3.00 PM and asked them questions.

Mr. ██████ stated that on this particular day, he awoke around 7.00 AM, and went downstairs. Around 10.00 AM, ██████ was door remained closed, and thought that he was still sleeping. Mr. ██████ stated that after lunch around 1.00 PM, he went upstairs to check on ██████ and as he opened the door he seen ██████ laying there with blood coming out of his eyes and nostrils, and foam coming out of his mouth. Mr. ██████ stated that he screamed for his wife, and his wife came running upstairs. Mr. ██████ stated that he was a medic in the military and immediately attempted to perform CPR, trying to revive ██████

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

Mr. ██████ stated that back in November of 2013, his son attempted suicide, and in May of this year his son was speaking about harming himself and transported him to ██████ Hospital, in which he was transported to ██████ for treatment. Mr. ██████ states that his son was in treatment for seven to ten days, and when he was released he was not given any medications, or a treatment plan. Mr. ██████ stated that he was told that if needed to follow up with services. Mr. ██████ states that the last time he communicated with his son was on Sunday. Mr. ██████ is the primary custodian, but ██████ was staying with the mother for the summer. Mr. ██████ states that ██████ freely went from house to house during the school year. Mr. ██████ stated that his son has a dark side to him, and states that he thought that maybe his son would think positive about the world, in which he was always saying that the world was so corrupt that there is no reason for living in it. Mr. ██████ states that when he last talked with his son, his son made no negative comments about any subject.

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

schedule for ██████ was that ██████ stayed up all night, and slept in to around noon. The locked container is located in the closet of the parents' bedroom. Mr. and Ms. ██████ stated that they usually lock the container at all times, but for some reasons the locked container was left unlocked. CPSI ██████ observed and conducted a pill count with the adults present. Ms. ██████ is prescribed the following medications; Thiola, Methodone, Prozac, Valium, and Inderal. Mr. ██████ is prescribed Etodolac, Klonopin, Neurontin, Tramadol, and Lamictal. As the worker was counting, the worker noticed that a bottle of Klonopin



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]

that was prescribed on 6/17/15 was empty. All of the other medications had more than the amount that added up. As the worker was taking photos of the medications, Mr. [REDACTED] became nervous and upset.

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 Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/18/2015	Contact Method:	
Contact Time:	10:49 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	12/18/2015
Completed date:	12/18/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/18/2015 10:50 AM Entered By: [REDACTED]
 IC [REDACTED] received permission from [REDACTED] to close this case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/15/2015	Contact Method:	
Contact Time:	03:08 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	12/15/2015
Completed date:	12/18/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:	Closing		

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/15/2015 03:09 PM Entered By: [REDACTED]

[REDACTED]
 Safety
 Case Summary
 Case Closure
 12/15/15

P1 referral was assigned by LI [REDACTED] (County) to CPSI [REDACTED] on 6/25/2015 with allegations of abuse death. The alleged perpetrators (AP) are [REDACTED] and [REDACTED] and the alleged child victim (ACV) was [REDACTED], age 15.

6/25/15: 3.00 PM-Det. [REDACTED] stated that he responded to a child death at around 3.00 PM. Det. [REDACTED] stated that the adults in the home have a history of using pills, and that [REDACTED] had access to the adult's medications. Det. [REDACTED] stated that there were no concerns of neglect or abuse by the parents in the home.

[REDACTED] stated that the last time he interacted with his brother was on Tuesday night on 6/24/15, while they were at separate homes while online playing games from their [REDACTED]. [REDACTED] stated that as the two were playing the video game, that his brother appeared to be happy, and made no comments that would lead one to believe that he was thinking about ending his life, or harming himself. [REDACTED] describes his brother as well rounded, intelligent, and was interesting in a variety of subjects. [REDACTED] stated that he had text messaged [REDACTED] girlfriend around 5.30 PM, and asked if she and [REDACTED] had broken up, and she said no. [REDACTED] then asked what time did she talk with [REDACTED] last, and she communicated that they were talking via [REDACTED] and she fell asleep around 11.00 PM.

Mr. [REDACTED] stated that back in November of 2013, his son attempted suicide, and in May of this year his son was speaking about harming himself and transported him to [REDACTED] Hospital, in which he was transported to [REDACTED] for treatment. Mr. [REDACTED] states that his son was in treatment for seven to ten days, and when he was released he was not given any medications, or a treatment plan. Mr. [REDACTED] stated that he was told that if needed to follow up with services. Mr. [REDACTED] states that the last time he communicated with his son was on Sunday. Mr. [REDACTED] is the primary custodian, but [REDACTED] was staying with the mother for the summer. Mr. [REDACTED] states that [REDACTED] freely went from house to house during the school year. Mr. [REDACTED] stated that his son has a dark side to him, and states that he thought that maybe his son would think positive about the world, in which he was always saying that the world was so corrupt that



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

there is no reason for living in it. Mr. [REDACTED] states that when he last talked with his son, his son made no negative comments about any subject.

The [REDACTED] stated that on Wednesday night, when they went to bed, that [REDACTED] was playing games, and did not know what time he went to bed. The [REDACTED] stated that the schedule for [REDACTED] was that [REDACTED] stayed up all night, and slept in to around noon.

Mr. [REDACTED] stated that on this particular day, he awoke around 7.00 AM, and went downstairs. Around 10.00 AM, [REDACTED] was door remained closed, and thought that he was still sleeping. Mr. [REDACTED] stated that after lunch around 1.00 PM, he went upstairs to check on [REDACTED] and as he opened the door he seen [REDACTED] laying there with blood coming out of his eyes and nostrils, and foam coming out of his mouth. Mr. [REDACTED] stated that he screamed for his wife, and his wife came running upstairs. Mr. [REDACTED] stated that he was a medic in the military and immediately attempted to perform CPR, trying to revive [REDACTED]

Ms. [REDACTED] states that on this day, that her husband when upstairs to check on [REDACTED] and heard a scream, that made her realize that something was wrong. Ms. [REDACTED] stated that she ran upstairs and as she ran through the door, she could see blood coming out of her sons eyes and nostrils, foam coming out of the mouth, and seen where the blood had begun to pool on his back and chest, which she described as purple in . Ms. [REDACTED] states that [REDACTED] slept in shorts with no shirt. Ms. [REDACTED] states that she tried to call 911, but was fumbling with the phone, and couldn't get the number dialed. Ms. [REDACTED] stated that she gave to telephone to her husband to call 911. Ms. [REDACTED] states that while her husband was calling 911, she pulled her son off the bed, and attempted to give [REDACTED] CPR. Ms. [REDACTED] states that the police and EMS arrived around 2.00-2.30 PM. Ms. [REDACTED] states two detectives arrived around 3.00 PM and asked them questions.

Detective [REDACTED] with the [REDACTED] Police Department office and CPSI [REDACTED] from [REDACTED] County DCS investigated the incident.

The AP was listed as [REDACTED] and [REDACTED]

All members of the household were interviewed along with the birth father [REDACTED], [REDACTED] and [REDACTED] was in the home, when [REDACTED] had passed. The locked container is located in the closet of the parents bedroom. Mr. and Ms. [REDACTED] stated that they usually lock the container at all times, but for some reasons the locked container was left unlocked. CPSI [REDACTED] observed and conducted a pill count with the adults present. Ms. [REDACTED] is prescribed the following medications; Thioia, Methodone, Prozac, Valium, and Inderal. Mr. [REDACTED] is prescribed Etodolac, Klonopin, Neurontin, Tramadol, and Lamictal. As the worker was counting, the worker noticed that a bottle of Klonopin that was prescribed on 6/17/15 was empty.

DCS policy Work Aid 1 (E) defines the following criteria for Child 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 childs caretakers failure to stop another persons 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 caretakers failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.

The case was presented to the [REDACTED] County Child Protective Investigation Team on December 9th, 2015. Team members were in agreement that there was sufficient evidence to Unsubstantiate the allegation Child Death. CPIT members who were agreement and signed were; [REDACTED] CPSI, [REDACTED] LI, [REDACTED] ADA, [REDACTED] CAC.

There is preponderance of evidence to Unsubstantiate the allegation of Child Death.
 The case will be closed and classified as Allegation Unsubstantiated Perpetrator Unsubstantiated for the allegation Child Death.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

A copy of the Child Protective Services Investigation Summary (740) was sent to the [REDACTED] County Juvenile Court Judge.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/15/2015	Contact Method:	
Contact Time:	03:07 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	12/15/2015
Completed date:	12/15/2015	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: 12/15/2015 03:08 PM Entered By: [REDACTED]

Closing FAST was completed on this date



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/09/2015	Contact Method:	Face To Face
Contact Time:	10:30 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	12/09/2015
Completed date:	12/09/2015	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: 12/09/2015 11:28 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 12/9/15
 CPIT meeting

CPSI [REDACTED] had introduced the case to the CPIT team. The team after reviewing all the information given to them had agreed that the case should be listed as AUPU (Allegations Unsubstantiated, Perpetrator Unsubstantiated). A copy of the signed CPIT form will be placed in section two of the case 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:	11/16/2015	Contact Method:	
Contact Time:	11:03 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/16/2015
Completed date:	11/16/2015	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: 11/16/2015 11:04 AM Entered By: [REDACTED]

[REDACTED]
Safety
CPIT form
11/16/15

CPSI [REDACTED] had completed the CPIT form in preparation for the upcoming CPIT team meeting. The worker had communicated with the CPIT partner at the time that the classification had been decided, and the CPIT partner agreed with the classification.
Safety



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	11/16/2015	Contact Method:	
Contact Time:	10:48 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/16/2015
Completed date:	11/16/2015	Completed By:	[REDACTED] [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: 11/16/2015 10:49 AM Entered By: [REDACTED]

The autopsy report is scanned into the document section under # [REDACTED]. A copy of the original will be placed in section two of the case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	11/13/2015	Contact Method:	
Contact Time:	03:12 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/13/2015
Completed date:	11/13/2015	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: 11/13/2015 03:13 PM Entered By: [REDACTED]
 CPSI [REDACTED] sent an email to Det. [REDACTED] requesting the autopsy report.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	11/13/2015	Contact Method:	
Contact Time:	03:07 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/13/2015
Completed date:	11/13/2015	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: 11/13/2015 03:12 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted the [REDACTED] County Medical Examiner's office in search of the autopsy report for [REDACTED] from the [REDACTED] office who stated that their office mailed it to Det. [REDACTED] on 9/22/15.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	11/03/2015	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/03/2015
Completed date:	11/03/2015	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/03/2015 10:08 AM Entered By: [REDACTED]

LI [REDACTED] followed up with ADA [REDACTED] to obtain autopsy report if available.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/28/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	09/29/2015
Completed date:	09/29/2015	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: 09/29/2015 05:13 PM Entered By: [REDACTED]
 CPSI [REDACTED] sent an email to ADA [REDACTED] asking if she has the autopsy report.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/14/2015 Contact Method:
 Contact Time: 10:30 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 08/17/2015
 Completed date: 08/17/2015 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: 08/17/2015 12:18 PM Entered By: [REDACTED]

Family Case Name: [REDACTED]

ACV: [REDACTED]

AP: [REDACTED]

Allegation: ABD

Case: Child Death; Parents woke up and checked on the ACV and he was foaming at the mouth and was blue. Called 911 and attempted CPR on him. He was pronounced deceased at the scene. It happened at approx. 2pm in the afternoon. Both parents are on medications and pill count was completed. One bottle of the father's medicine was missing. Medicine was secured in a safe but that night the safe was not secured. Parents were sleeping downstairs and did not hear the child access the safe.

LE had no concerns and preliminary autopsy was completed but Det. [REDACTED] did not provide details. CPSI [REDACTED] had previously had a case with the family when he attempted suicide and was at [REDACTED] No services or medications were recommended at release from [REDACTED]

All interviews were completed. Services were recommended. Autopsy report has not been received.

Next steps: re-request medical records; follow up with Detective for further information; obtain autopsy report.

Classification: Unknown at this time



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/09/2015 Contact Method:
 Contact Time: 09:00 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 07/09/2015
 Completed date: 07/09/2015 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: 07/09/2015 01:02 PM Entered By: [REDACTED]

[REDACTED]
 Safety
 Records from [REDACTED]
 7/9/15

CPSI [REDACTED] received a copy of the medical records from [REDACTED] CPSI [REDACTED] scanned the records into the document section of TFACTS, it will be under document # [REDACTED]. The medical records will be placed into section two of the case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/08/2015	Contact Method:	
Contact Time:	09:44 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	07/08/2015
Completed date:	07/08/2015	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: 07/08/2015 09:45 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 7/8/15
 Police Report

CPSSI [REDACTED] received a copy of the police report and entered it in the document section of TFACTS. The document # is [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/02/2015	Contact Method:	
Contact Time:	12:13 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	07/02/2015
Completed date:	07/02/2015	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: 07/02/2015 12:14 PM Entered By: [REDACTED]

[REDACTED]
 Safety
 7/2/15
 EMS report

CPSI [REDACTED] received a copy of the EMS report. The report is filed underneath Document # [REDACTED] A copy of the report will be placed in the case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/29/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	06/29/2015
Completed date:	06/29/2015	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: 06/29/2015 01:05 PM Entered By: [REDACTED]

[REDACTED]
Safety
6/29/15
Service Provider

CPSI [REDACTED] contacted Survivor Outreach Services on [REDACTED] to inquire about what services can be provided for the [REDACTED] family. CPSI [REDACTED] spoke with the coordinator at the center. CPSI [REDACTED] provided a contact number and briefly spoke about the circumstances surrounding the death of [REDACTED]. The Coordinator stated that she would contact the father and offer services. The coordinator took the workers contact number for future references.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/29/2015	Contact Method:	Attempted Phone Call
Contact Time:	10:45 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/29/2015
Completed date:	06/29/2015	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: 06/29/2015 10:48 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 Collateral Contact
 Attempted Telephone call
 6/29/15

CPSI [REDACTED] attempted to call the [REDACTED] family ([REDACTED]) to inquire if the Department could interview their daughter. The worker left a message on the voicemail, in hope of the family contacting the worker at a future time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/26/2015	Contact Method:	
Contact Time:	01:59 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	06/26/2015
Completed date:	06/26/2015	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: 06/26/2015 01:59 PM Entered By: [REDACTED]

Safety
 Family Advocacy and Support Tool (FAST)
 6/26/15
 [REDACTED]

CPSI [REDACTED] completed the FAST Assessment in TFACTS. The Family Advocacy and Support Tool (FAST) is the family version of the Child and Adolescent Needs and Strengths (CANS) family of planning and outcome management tools. The results of the FAST was Moderate Need / Risk

Safety



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/26/2015	Contact Method:	
Contact Time:	01:58 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	06/26/2015
Completed date:	06/29/2015	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: 06/26/2015 01:58 PM Entered By: [REDACTED]

[REDACTED]
Safety
6/29/15
Background Checks

CPSI [REDACTED] did a search of the Tennessee Bureau of Investigation sex offender registry (<http://www.ticic.state.tn.us/sorinternet/sosearch.aspx>) and no results were found for [REDACTED]

CPSI [REDACTED] did a search of the Tennessee Bureau of Investigation Meth Offender Registry (<http://www.tennesseeanytime.org/methor/>) and no results were found for [REDACTED]

CPSI [REDACTED] did a Tennessee felony offender search (<http://www.tennesseeanytime.org/foil/search.jsp>) and no results were found for [REDACTED].

CPSI [REDACTED] had conducted a search with the National Sexual Offender Registry (www.nspor.gov/) and no results were found for [REDACTED].

CPSI [REDACTED] had conducted a search with the Tennessee Department of Health Vulnerable Persons (Abuse Registry) at (health.state.tn.us/abuse_registry/index/html) and no results were found for [REDACTED]

CPSI [REDACTED] had conducted a Data base search (SSMS) and current child welfare information system check and no results were found for [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/26/2015	Contact Method:	
Contact Time:	01:58 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	06/26/2015
Completed date:	06/26/2015	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: 06/26/2015 01:59 PM Entered By: [REDACTED]

[REDACTED]
Safety
6/26/15
Safety Assessment (initial)

Assessment of Safety

The safety assessment is used to determine immediate danger of serious harm and to determine what, if any intervention is necessary to provide appropriate protection.

The risk assessment is used to obtain an objective appraisal of likelihood that a family will maltreat their children in the next 12 to 24 months. This assessment is used to determine the need for and level of services for a family

CPSI [REDACTED] had completed the Safety Assessment (initial) and had sent the completed document to the TL through the TFACTS system for signature and approval. The results of the Assessment is as follows; SAFE
There are no immediate harm factors present. The worker has checked for the following factors;

History of Abuse and Neglect Factors

Include but not limited to evidence of past maltreatment that was life endangering or threatened the health and development of the child or any other child. There is a pattern of abuse or neglect suggesting parental/caretaker behaviors that have developed over time or escalated.

Child Factors

The child is vulnerable due to age, health, developmental level, problematic behaviors, or difficulty in the parent-child relationship.

Parent/Caretaker Factors

The behavior or conditions of the parent/caretaker present a threat of harm to the child and there is no evidence of sufficient family strength to counter the behavior or condition.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Environmental Conditions

There are significant problems in the home environment relating to child safety or isolation from family support systems.

Services Provision Factors

Parents have had the opportunity to participate in services to reduce but services have made no appreciable change.

Safety



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 06/26/2015 Contact Method:
Contact Time: 11:28 AM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: DCS Office Created Date: 06/26/2015
Completed date: 06/26/2015 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: 06/26/2015 11:29 AM Entered By: [REDACTED]

[REDACTED]
Safety
Case Summary
Case Assignment
6/26/15

On 6/25/15, a P-1 referral was called into [REDACTED]. The referral was screened into [REDACTED] County, with the allegations of Abuse Death. The alleged perpetrators are [REDACTED] and [REDACTED] the victim is [REDACTED]. This referral was assigned by TL [REDACTED] on 6/25/15, and assigned to CPSI [REDACTED]. Response time was due immediately.

Reporter states: [REDACTED] (15) currently resides with his father, [REDACTED] and his wife, Unknown in [REDACTED]. It is possible that other children reside in the household, they are unknown by the reporter. The mother is [REDACTED] and her husband is [REDACTED]; they reside in [REDACTED] County. [REDACTED] was not in DCS custody. [REDACTED] was found deceased at the home of [REDACTED] and [REDACTED] around 2:33 PM this afternoon. He was found in his bedroom; as it is suspected that [REDACTED] overdosed on pills. [REDACTED] had a history of attempting suicide. His first attempt was in November 2014, and at that time, [REDACTED] had attempted to overdose on pills. He was sent to [REDACTED] and was given a charcoal treatment, and then transferred to [REDACTED] to receive treatment for 8-10 days. [REDACTED] also attended counseling in May 2015 at [REDACTED]. It was reported that in May, [REDACTED] had taken his father's Percocet medication and was contemplating suicide. [REDACTED] was not involved in counseling at the time of his death. [REDACTED] was prescribed blood pressure medication, medication unknown by the referent. It is unknown what other medications [REDACTED] had taken prior to his death. It was reported that there were several pills available in the home when this took place. The medications were prescribed to either [REDACTED] or [REDACTED].

[REDACTED] medications include, as spelled by the reporter: Trimethoprim, Propranolol (120 mg), and Propranolol (90mg). [REDACTED] medications include, as spelled by the reporter: Etodoiac, Gabapentin, Prazosin (X2), Cetirizine, Docusate, Dmetrazde, Lamotrigine, and Methocarbamol. The pill bottles contained anywhere from 0 to 180 pills [REDACTED] and [REDACTED] suspect that [REDACTED] took their medications with the intent of overdosing and killing himself. [REDACTED] was arguing with his girlfriend last night and was very broken up about it. The medications were kept in an unlocked safe in [REDACTED] and [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

[REDACTED] bedroom closet. [REDACTED] and [REDACTED] were at home when this took place. An autopsy will be completed in [REDACTED]. It is unknown if anyone in the house has any kind of alcohol or drug abuse or mental health issues. It is reported that [REDACTED] has severe PTSD.

This worker verified the family's history of involvement with DCS through a search of TFACTS and the following information was found;

Inv# [REDACTED] from 11/6/14-12/3/14 for LOS/DEC, with the alleged perpetrators being [REDACTED] and [REDACTED] with the outcome of the case being a Administrative Closure.

Inv# [REDACTED] from 11/13/14-2/4/15 for DEC/LOS/SEE, with the with the alleged perpetrators being [REDACTED] for DEC and [REDACTED] for LOS/DEC, and [REDACTED] for SAE, with the results of the case being AUPU for DEC/LOS, and ASPS for SAE.

A copy of the Child Protective Services Investigation Allegations was sent to the [REDACTED] County Juvenile Court Judge.
 A copy of the Child Protective Services Investigation Allegations was sent to the Assistant District Attorney.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/26/2015	Contact Method:	Attempted Phone Call
Contact Time:	10:52 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	06/29/2015
Completed date:	06/29/2015	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: 06/29/2015 10:37 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 Attempted Telephone Call
 6/29/15

CPSI [REDACTED] attempted to call the family of [REDACTED] girlfriend. CPSI [REDACTED] left a message on the telephone in hopes that the parent (s) would return the telephone call. CPSI [REDACTED] will make another attempt.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/25/2015 Contact Method:
 Contact Time: 10:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 06/26/2015
 Completed date: 06/26/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/26/2015 10:03 AM Entered By: [REDACTED]

CPSI [REDACTED] followed up with the family and then updated LI [REDACTED] with the following information. The child, [REDACTED] went to [REDACTED] campus for 7-10 days in May 2015. The family reports that there were no discharge/aftercare recommendations. CPSI [REDACTED] observed the family to have a lock box for medications in the bedroom. The parents take numerous medications for a variety of health issues. A bottle of medication was missing from the home. CPSI gather the following timeline information about the family. [REDACTED] began residing with Ms. [REDACTED] mother and his step father after school was let out for the summer. This is part of the parenting plan. [REDACTED] is reported to go back and forth between his mother and father's home as he desired. [REDACTED] typical day he would play video games and interact with family during the day. It is reported that [REDACTED] would talk, [REDACTED] text with his girlfriend during the evening hours well into the morning. [REDACTED] would sleep until 10:00 to 12:00 A. M. On the day of his death the mother/stepfather reported that [REDACTED] door was shut and they assumed he was sleeping. They went to check on him at some point and found [REDACTED] deceased. The family called 911 and the father attempted CPR however it was too late. It was reported that blood had already started to pool. There is a 17 year old child who is currently residing with his girlfriend and her parents. This child was briefly interviewed. It was reported that [REDACTED] was talking/skyping his girlfriend prior to his death.

Next Steps:

1. EMS personal interview
2. Interview the girlfriend.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2015	Contact Method:	Attempted Face To Face
Contact Time:	10:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Caretaker Home	Created Date:	07/08/2015
Completed date:	07/08/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Good Faith Effort, Initial ACV Face To Face		
Contact Sub Type:	Attempted Home Visit/Home Visit		

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/08/2015 02:16 PM Entered By: [REDACTED]

No Face to face was conducted due to the child is deceased.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2015	Contact Method:	Attempted Face To Face
Contact Time:	10:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Caretaker Home	Created Date:	07/08/2015
Completed date:	07/08/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Good Faith Effort, Initial ACV Face To Face		
Contact Sub Type:	Attempted Home Visit/Home Visit		

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/08/2015 02:17 PM Entered By: [REDACTED]

No Face to face was conducted due to the child is deceased.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2015	Contact Method:	Face To Face
Contact Time:	10:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	07/16/2015
Completed date:	07/16/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Good Faith Effort		
Contact Sub Type:	Collateral Contact		

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/16/2015 04:03 PM Entered By: [REDACTED]

No Face to face was conducted due to the child being deceased.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED] [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/25/2015 Contact Method:
 Contact Time: 09:33 PM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 06/25/2015
 Completed date: 06/25/2015 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Service Planning, Well Being
 Contact Type(s): Notation
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/25/2015 09:35 PM Entered By: [REDACTED]

The child death near death form was sent to LI [REDACTED] CPSI [REDACTED] and IC [REDACTED]
 CPSI [REDACTED] texted LI [REDACTED] notifying he had arrived at the family home.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 06/25/2015 Contact Method: Face To Face
Contact Time: 09:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 06/26/2015
Completed date: 06/26/2015 Completed By: [REDACTED]
Purpose(s): Safety - Child/Community
Contact Type(s): Alleged Perpetrator Interview, Parent/Caretaker Interview, Sibling Interview/Observation
Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/26/2015 11:23 AM Entered By: [REDACTED]

[REDACTED]
Safety
F2F
Home Visit
6/25/15

CPSI [REDACTED] engaged the family by explaining that Child Protective Services receive screen and investigate reports of suspected child abuse and neglect and conduct safety and risk assessments. Child protective services can provide or refer families to alternative response services. The agency arranges, provides, and coordinates the delivery of culturally responsive services to ensure child safety, promote well-being and keep families together whenever possible. CPSI [REDACTED] explained the current report made to the [REDACTED] Department of Children Services and the Investigation process. CPSI [REDACTED] provided the family with a brochure describing the Multiple Response Approach. This worker provided the family with a copy of the Parents Bill of Rights, Client Rights Handbook, and Notification of Equal Access to Services Grievance Procedures, Notice of Privacy Practices, and the Native American Veto Heritage on this date. This worker obtained signed acknowledgments of such and copies have been placed in the appropriate sections

CPSI [REDACTED] interviewed the following individuals, [REDACTED] (mother), [REDACTED] (stepfather), [REDACTED] (father), and [REDACTED] (brother). The following information was obtained during the course of the interview process.

CPSI [REDACTED] interviewed [REDACTED] (brother), in private, and received the following information. [REDACTED] stated that the last time he interacted with his brother was on Tuesday night, while they were at separate homes while online playing games from their [REDACTED] [REDACTED] stated that as the two were playing the video game, that his brother appeared to be happy, and made no comments that would lead one to believe that he was thinking about ending his life, or harming himself. [REDACTED] describes his brother as well rounded, intelligent, and was interesting in a variety of subjects. [REDACTED] stated that he had text messaged [REDACTED] girlfriend around 5.30 PM, and asked if she and [REDACTED] had broken up, and she said no. [REDACTED] then asked what time did she talk with [REDACTED] last, and she communicated that they were talking via [REDACTED] and she fell asleep around 11.00 PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPSI [REDACTED] interviewed [REDACTED] in private. The following information was obtained during the course of the interview process. The worker apologized for interrupting their grieving process, and stated that on behalf of the Department, that the Department is sorry for his lost. Mr. [REDACTED] stated that back in November of 2013, his son attempted suicide, and in May of this year his son was speaking about harming himself and transported him to [REDACTED] in which he was transported to [REDACTED] for treatment. Mr. [REDACTED] states that his son was in treatment for seven to ten days, and when he was released he was not given any medications, or a treatment plan. Mr. [REDACTED] stated that he was told that if needed to follow up with services. Mr. [REDACTED] states that the last time he communicated with his son was on Sunday. Mr. [REDACTED] is the primary custodian, but [REDACTED] was staying with the mother for the summer. Mr. [REDACTED] states that [REDACTED] freely went from house to house during the school year. Mr. [REDACTED] stated that his son has a dark side to him, and states that he thought that maybe his son would think positive about the world, in which he was always saying that the world was so corrupt that there is no reason for living in it. Mr. [REDACTED] states that when he last talked with his son, his son made no negative comments about any subject.

CPSI [REDACTED] interviewed Ms. [REDACTED] in her living room, Ms. [REDACTED] didn't feel comfortable about being interviewed by her, so Mr. [REDACTED] was with her during the process. The worker apologized for interrupting their grieving process, and stated that on behalf of the Department, that the Department is sorry for his lost. The [REDACTED] stated that they were both receiving disability for various ailments, and listed with the worker the list of medications that they were taking. The [REDACTED] stated that [REDACTED] has been at their home since school was out, and that [REDACTED] has been staying up playing games and talking on the telephone with his girlfriend. The [REDACTED] stated that on Wednesday night, when they went to bed, that [REDACTED] was playing games, and did not know what time he went to bed. The [REDACTED] stated that the schedule for [REDACTED] was that [REDACTED] stayed up all night, and slept in to around noon.

Mr. [REDACTED] stated that on this particular day, he awoke around 7.00 AM, and went downstairs. Around 10.00 AM, [REDACTED] was door remained closed, and thought that he was still sleeping. Mr. [REDACTED] stated that after lunch around 1.00 PM, he went upstairs to check on [REDACTED] and as he opened the door he seen [REDACTED] laying there with blood coming out of his eyes and nostrils, and foam coming out of his mouth. Mr. [REDACTED] stated that he screamed for his wife, and his wife came running upstairs. Mr. [REDACTED] stated that he was a medic in the military and immediately attempted to perform CPR, trying to revive [REDACTED]

Ms. [REDACTED] states that on this day, that her husband when upstairs to check on [REDACTED] and heard a scream, that made her realize that something was wrong. Ms. [REDACTED] stated that she ran upstairs and as she ran through the door, she could see blood coming out of her sons eyes and nostrils, foam coming out of the mouth, and seen where the blood had begun to pool on his back and chest, which she described as purple in . Ms. [REDACTED] states that [REDACTED] slept in shorts with no shirt. Ms. [REDACTED] states that she tried to call 911, but was fumbling with the phone, and couldn't get the number dialed. Ms. [REDACTED] stated that she gave to telephone to her husband to call 911. Ms. [REDACTED] states that while her husband was calling 911, she pulled her son off the bed, and attempted to give [REDACTED] CPR. Ms. [REDACTED] states that the police and EMS arrived around 2.00-2.30 PM. Ms. [REDACTED] states two detectives arrived around 3.00 PM and asked them questions.

CPSI [REDACTED] observed the locked box where the medications were stored. The locked container is located in the closet of the parents' bedroom. Mr. and Ms. [REDACTED] stated that they usually lock the container at all times, but for some reasons the locked container was left unlocked. CPSI [REDACTED] observed and conducted a pill count with the adults present. Ms. [REDACTED] is prescribed the following medications; Thiola, Methodone, Prozac, Valium, and Inderal. Mr. [REDACTED] is prescribed Etodolac, Klonopin, Neurontin, Tramadol, and Lamictal. As the worker was counting, the worker noticed that a bottle of Klonopin that was prescribed on 6/17/15 was empty. All of the other medications had more than the amount that added up. As the worker was taking photos of the medications, Mr. [REDACTED] became nervous and upset.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2015	Contact Method:	Phone Call
Contact Time:	07:45 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	06/26/2015
Completed date:	06/26/2015	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: 06/26/2015 11:28 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 Referent Contact
 6/26/15

CPSI [REDACTED] contacted the referent to communicate that the report that was made was assigned and that this worker is the assigned case manager. The worker also inquired about any additional information that would assist in the investigation process. The referent stated that there were no concerns of abuse or neglect by the parents.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2015	Contact Method:	Phone Call
Contact Time:	07:30 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	06/26/2015
Completed date:	06/26/2015	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: 06/26/2015 11:20 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 Collateral Contact
 6/25/15

CPSI [REDACTED] telephoned Detective [REDACTED] to inquire about any information that would assist in the investigation process. Det. [REDACTED] stated that he responded to a child death at around 3.00 PM. Det. [REDACTED] stated that the adults in the home have a history of using pills, and that [REDACTED] had access to the adult's medications. Det. [REDACTED] stated that there were no concerns of neglect or abuse by the parents in the home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2015	Contact Method:	Phone Call
Contact Time:	07:30 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	06/26/2015
Completed date:	06/26/2015	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: 06/26/2015 11:24 AM Entered By: [REDACTED]

[REDACTED]
 Safety
 Convening of the Child Protective Investigation Team (CPIT)
 6/25/15

CPSI [REDACTED] had convened CPIT, by the procedure that has been established by the local protocol.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/25/2015 Contact Method:
 Contact Time: 06:45 PM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 06/25/2015
 Completed date: 06/25/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/25/2015 09:27 PM Entered By: [REDACTED]

A search of TFACTs resulted in two prior open cases from November of 2014 case ID [REDACTED] allegations were drug exposed child, lack of supervision which were unsubstantiated and sex abuse which was substantiated. The child was in counseling during the course of the case. It was noted on 1/20/15 that the family experienced a death in the family. The case was closed on 2/4/14. Case ID [REDACTED] was received on 11/6/14 the allegations in this case were lack of supervision and drug exposed child which were administratively closed.

On 6/25/15 at 6:45 p.m, LI [REDACTED] received a call from the on-call CPSI [REDACTED] alerting her to a child death pending in the pool .CPSI [REDACTED] advised that CPSI [REDACTED] would be running this case as he as the backup on call investigator. LI [REDACTED] reviewed the intake number [REDACTED] and phoned IC [REDACTED] concerning the pending child death. LI [REDACTED] was advised to ensure that the following items were completed;

1. Case is established and date of death is entered into TFACTS in the demographic tab.
2. Ensure prior case file is requested, [REDACTED], [REDACTED] and any other medical records on the child. Obtain parents records for their medication.
3. Assess if there are any other children in the home and if they are safe.

At 7:56 p.m. LI [REDACTED] spoke with CPSI [REDACTED] CPSI [REDACTED] indicated he has spoken Homicide Detective [REDACTED] who has no concerns with the home or the parents. There was no apparent foul play noted by the Detective. The Detective indicated that there were no other children in the home. The child was found deceased in the mother Ms. [REDACTED] home. [REDACTED] body has already been sent to [REDACTED] for an autopsy.

At 8:02 p.m. LI [REDACTED] updated LI [REDACTED] with the above information. Additional instructions provided were to have CPSI [REDACTED] to go to the home tonight and interview the parents, conduct a walk-through of the home and obtain photos of the home. CPSI [REDACTED] should also obtain interviews with first responders and find out if EMS was called. CPSI [REDACTED] was notified of these instructions via phone call and via text message.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED] TN DCS Intake ID #: [REDACTED]
 County: [REDACTED] Worker:
 Date of Referral: 6/25/15 5:10 PM Date of Assessment: 6/26/15 12:00 AM
 Assessment Type: Initial Number of Children in the Household: 1

Section 1: Immediate Harm Factors

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

Yes No

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



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: _____