



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 08/07/2013 06:47 PM [REDACTED]
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 08/07/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 08/09/2013 05:23 AM
First Team Leader Assigned: [REDACTED] Date/Time 08/07/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 08/07/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	14 Yrs	Medical Maltreatment	No	[REDACTED]	[REDACTED]
[REDACTED]	14 Yrs	Physical Abuse	No	Unknown Participant [REDACTED] Unknown	[REDACTED]

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
Referent Address: [REDACTED]
Referent Phone Number: [REDACTED]
Type of Contact: [REDACTED]
Notification: None
Narrative: TFACTS History: Yes

Open Court Custody/FSS/ FCIP: No

Prior INV/ASMT of Abuse: Yes [REDACTED] Case-ID [REDACTED]
Prior INV/ASMT of Neglect: Yes [REDACTED] [REDACTED] [REDACTED]

Indicated: [REDACTED] PHA [REDACTED] [REDACTED] [REDACTED] [REDACTED] PHA [REDACTED] [REDACTED]



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

County [REDACTED]
Notification: None
School/ Daycare: Unknown
Native American Descent: No
Directions:

Reporter's name/relationship: [REDACTED]

[REDACTED] states:

[REDACTED] 13 lives with his mother [REDACTED] and two sisters(Unknown). [REDACTED] is in a diabetic crisis. The child was transferred from [REDACTED] about fifty three minutes ago. The child was noticed to have sevier bruising on his legs, back and buttocks. The child said that his uncle(Unknown) gave him a spanking.

It's unknown when the incident happened. The [REDACTED] talked to the mother over the phone and she's not coming to the hospital because she is disabled. On 8-3-2013, the child began complaining of chest pain. On 8-4-13, the child started acting disoriented and confused. The child then began refusing food, water and medication. The mother said she had to force feed the child; it continued on until 8-5-13 on Monday.

On Tuesday, 8-6-13 around three or four in the morning, the neighbor came banging on the door and said the child had [REDACTED] down the stairs. All day Tuesday, the child continued to act disoriented and confused. The mother called the ambulance today to come and take the child to the hospital. The concerns are the bruising and may be some broken bones. The family has a long history of non compliance with the child medical treatment. The child will be admitted to the hospital and he's going to be in the critical care unit. The child has diabetes and asthma . It's unknown if the child has any special needs. The [REDACTED] wants immediate assistance.

P-1 Investigative Track. [REDACTED] CM 3 @ 7:55pm on 8-7-13

Event [20]Alert Started (6705), Status: [20]Alert Started, [REDACTED] @ 7:55pm
[REDACTED] esponded @ 7:59pm on 8/7/13 [REDACTED]



**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: **Race:** **Age:** 30 Yrs (Est)
Address:
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: Yes
DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]
Gender: Male **Date of Birth:** [REDACTED] **Participant ID:** [REDACTED]
SSN: **Race:** **Age:** 14 Yrs
Address: [REDACTED]
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: No
DCS Foster Child: No

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]

Participant ID: [REDACTED]

SSN: Race: Age: 16 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: Unknown Participant [REDACTED] Unknown

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 4 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

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: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 31 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [Redacted]

Investigation ID: [Redacted]

Referral Date: 08/07/2013

Assignment Date: 10/18/2013

Street Address: [Redacted]

City/State/Zip: [Redacted]

B. Allegation

Table with 9 columns: #, Children's Name, DOB/SSN, Specific Allegation for Each Child, Alleged Perpetrator's Name, DOB/SSN, Classification, Severe Abuse, Classified By/Classified Date. Contains 3 rows of allegations.

C. Disposition Decision

Disposition Decision:

Comments:

D. Case Workers

Case Worker: [Redacted]

Date: 01/01/2014

Team Leader: [Redacted]

Date: 01/02/2014

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:

CPSI [Redacted] interviewed [Redacted] 15 year old half-sister of ACV. [Redacted] said she was at her grandmother's house for "about 5 days" because [Redacted] was sick and I did not want to get sick. She said her mother, [Redacted] called her grandmother, [Redacted] on Saturday to tell her that [Redacted] had called 911 at 4:00 am because he wasn't feeling good. Then on Monday when she got out of school, she rode the bus to her house. She said [Redacted] was at home and still not feeling well but her mother was upset because she said he was not listening to her. [Redacted] said her mother told [Redacted] to clean his room and "he sat there, wasn't talking at all" and she started to beat him with a belt. She said [Redacted] "was not crying or nothing he just sat



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]

there while she was beating him." [REDACTED] said her mother told him again to clean his room and he did not respond so her mother thought he was being rebellious and "kept beating him" until my grandmother came to pick me up and her mother told her grandmother that [REDACTED] was not listening to her. She said her brother "just laid there" until her uncle [REDACTED] came over tried to get [REDACTED] to eat and [REDACTED] "fell into his arms and he took him to his room." [REDACTED] stated that her uncle asked what had happened and her mother told her uncle that she had "beat" him because he was not listening to her. [REDACTED] said she did not tell her grandmother or anyone else what happened because she was scared of what her mother would do if she found out.

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

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

CPSI [REDACTED] interviewed [REDACTED] and was told first that ACV [REDACTED] had spent the entire weekend (from Friday at 400 pm until Monday at 500 pm) with his father. CPSI [REDACTED] pointed out that DCS had just indicated the father for physical abuse from an incident that occurred in June and [REDACTED] had told DCS that ACV would not have contact with his father because she would be protective. She quickly stated that she had been mistaken, that the ACV did not spend time with his father but with his half-brother and his paternal grandparents, The [REDACTED] who are from [REDACTED] and his brother's mother [REDACTED]. She stated they had come to Tennessee for ACV's birthday to celebrate since the other boy's birthday is the day following ACV's birthday. She said they stayed at the "[REDACTED]" in [REDACTED] and [REDACTED] had asked if she could pick [REDACTED] up on Friday for them to go out to eat and celebrate. She said while ACV was gone he called and said, "He's here" and "He's not my daddy" because his father had come with the other family members to celebrate his birthday. [REDACTED] stated that [REDACTED] was brought back home at 5:00

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

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

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/27/2014

Contact Method:

Contact Time: 01:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/06/2014

Completed date: 02/06/2014

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: 02/06/2014 10:26 AM Entered By: [REDACTED]

An administrative review was held and completed on 1/27/14, for the purpose of discussion of the indication of severe abuse by the parent(s) per Section 8 requirement. Participating in the discussion were [REDACTED] Attorney; [REDACTED] IC and [REDACTED] LI and [REDACTED] SS TL. The decision was made to pursue a severe abuse finding in court.



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: 01/03/2014

Contact Method:

Contact Time: 12:22 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/03/2014

Completed date: 01/03/2014

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: 01/03/2014 12:33 PM Entered By: [REDACTED]

This case was reviewed for closure. LI [REDACTED] staffed this case with IC [REDACTED] and RID [REDACTED] throughout the life of the case. LI [REDACTED] worked closely with the maternal grandmother, who was granted temporary custody of the children, and health providers to meet [REDACTED] needs. [REDACTED] continued to have medical concerns while in his maternal grandmother's care and entered custody in an attempt to stabilize his Type 1 diabetes. The other children placed with the maternal grandmother remain in her care. The BM was indicated for MDM-SA and PHA-SA. This case has been approved for closure.



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: 01/01/2014 Contact Method:
 Contact Time: 05:47 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/01/2014
 Completed date: 01/01/2014 Completed By: [REDACTED]
 Purpose(s): Permanency, 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: 01/01/2014 05:51 PM Entered By: [REDACTED]

Family was given copies of the following documents. Forms were reviewed and signed by mother:

Notice of Privacy
 Title IV Form
 Native American Heritage Veto Verification Form
 Clients Rights Handbook
 Release of Information forms
 Parents Bill of Rights
 MRS Brochure

Case Summary- DCS was investigating referral # [REDACTED] with allegations of medical maltreatment and physical abuse with AP as [REDACTED] and Unknown. This case was assigned to CPSI [REDACTED] who completed all interviews and learned that different stories about the injuries on the ACV when he was hospitalized had been told. CPSI [REDACTED] spoke with all family members both maternal and paternal and learned by speaking with older sister [REDACTED] that birth mother [REDACTED] had caused the bruising and marks on ACV [REDACTED] because he would not respond when told to clean his room and return a cell phone his mother said ACV had taken from her. [REDACTED] stated that her mother "beat him with a belt and kept beating him and kept beating him" when he was not responding to her commands to clean his room. This was confirmed by ACV who stated he could not move and this was the reason he did not respond. ACV was eventually taken by ambulance to the hospital and his mother would not accompany him or call EMS. This was completed after a phone call to his grandmother who went with him to seek treatment. This information has been given to law enforcement to see if charges will be made against mother. ACV also reported that he had told his mother he was sick and he had tried to call 911 but when emergency responded to the home they were told by the mother that there was no one at the home who needed assistance. ACV said this was not the first time his mother had hit him but it was the first time she would not stop. An expedited home study was completed and temporary emergency custody was sought with maternal grandmother [REDACTED]. ACV continued to have serious problems with monitoring of diabetes presenting at [REDACTED] for medical treatment 5 times since being placed with [REDACTED]. ACV came into DCS custody on 12/13/2013 after another episode of DKA at [REDACTED] in which the ACV was unresponsive and then disclosed intentions to self harm. ACV was admitted to [REDACTED] Hospital for stabilization. This case will be classified as ASPS for the allegations of medical maltreatment (which was



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

changed to near death on 8/23/2013 by Dr. [REDACTED] and ASPS on the allegations of physical abuse based on the information learned in the interviews as well as the disclosure by the ACV himself. AP mother has not had any contact with DCS after changing her phone number and her residence without notifying her attorney or DCS case worker.

Signs of Safety were: Child is in custody.

Signs of Permanence were: Grandmother is willing to care for ACV after he is stabilized and if she is able to administer medical monitoring.

Signs of Well Being were: Child is in state custody where he can receive proper medical care to address his health issues and stabilize his blood sugar levels.

740 Form is sent to the Juvenile Court and the DA on the first Thursday of the following 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: 12/30/2013

Contact Method: Correspondence

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

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: 01/01/2014 06:21 PM Entered By: [REDACTED]

Substantiated Letter was mailed to last known address for mother 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: 12/16/2013

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Court

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Court Hearing

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/01/2014 05:45 PM Entered By: [REDACTED]

Court was held bringing ACV [REDACTED] [REDACTED] into state custody so he could receive the necessary monitoring and treatment for his medical condition. This action was signed by Judge [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: 12/13/2013 Contact Method: Phone Call
 Contact Time: 10:00 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/01/2014
 Completed date: 01/01/2014 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/01/2014 05:15 PM Entered By: [REDACTED]

CPSI [REDACTED] received a phone call from [REDACTED] that ACV had disclosed the idea of self harm and that he was going to be evaluated by mobile crisis. ACV was said to have uncontrolled Type 1 Diabetes that was still not being controlled. CPSI [REDACTED] advised she would contact appropriate supervision and see what action needed to be taken.



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: 12/12/2013 Contact Method: Phone Call
 Contact Time: 02:00 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 12/31/2013
 Completed date: 12/31/2013 Completed By: [REDACTED]
 Purpose(s): Service Planning
 Contact Type(s): Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/31/2013 08:34 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] Social Worker [REDACTED] who stated that ACV [REDACTED] had expressed feelings of depression and the desire to self harm. [REDACTED] stated [REDACTED] has been contacted to complete an intake on ACV.



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Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/11/2013

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

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: 01/01/2014 05:12 PM Entered By: [REDACTED]

CPSI [REDACTED] receiving a phone call informing her that ACV had presented again at [REDACTED] in full DKA and was slow to respond with his blood sugar out of control. CPSI [REDACTED] advised she would speak with supervision and get back to hospital.



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:	12/06/2013	Contact Method:	Face To Face
Contact Time:	04:15 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:	Family Home	Created Date:	01/01/2014
Completed date:	01/01/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 05:38 PM Entered By: [REDACTED]

CPSI [REDACTED] responded to the home of ACV [REDACTED] [REDACTED] after it was reported that he was afraid of his grandmother and that she had hit him. CPSI [REDACTED] learned that ACV had gotten mad at his grandmother the previous day and left the home without permission. He had reportedly gone to his aunt's house where he took a cell phone that did not belong to him and then refuse to return it when questioned about it. [REDACTED] stated she did not lay a hand on him but did take the cell phone and return it to its owner. She said that ACV had been talking back to her, refusing to follow direction and slamming doors acting angry. She said she had tried to address this but had been unsuccessful. She reported Children's Special Services are to begin in the home next week. CPSI [REDACTED] discussed with [REDACTED] the importance of appropriate behavior even when the ACV is not following instruction and discussed appropriate ways of disciplining such as restriction from activities or gaming. [REDACTED] said she was trying those methods by ACV was not listening. [REDACTED] was advised that again that a referral had been made to [REDACTED] [REDACTED] a provider who would help her with these issues.



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: 12/05/2013

Contact Method: Phone Call

Contact Time: 03:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/01/2014 05:21 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted [REDACTED] and made a referral after being asked by grandmother to search for and recommend another mental health, behavior service after she felt that the ACV had become too dependent on the counselor from [REDACTED] at the school. [REDACTED] accepted the referral and made contact with the family to schedule 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:	12/05/2013	Contact Method:	Phone Call
Contact Time:	02:45 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/01/2014
Completed date:	01/01/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/01/2014 05:19 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted Children's Special Services as discussed with family about providing in home services to ensure proper administration of medication to ACV. [REDACTED] County Health Dept accepted the case and made contact with the family to begin 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: 12/05/2013 Contact Method: Face To Face
 Contact Time: 10:30 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 12/09/2013
 Completed date: 12/09/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Other Child Living in the Home Interview/Observation,Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2013 03:13 PM Entered By: [REDACTED]

CPSI [REDACTED] and [REDACTED] Nurse [REDACTED] went to the home of caregiver [REDACTED] to assess the situation in the home and see what services would be available locally to assist the grandmother in caring for ACV [REDACTED] who has Type 1 diabetes. CPSI [REDACTED] introduced RN [REDACTED] to [REDACTED] and explained the purpose for bringing her to the home. [REDACTED] stated that she felt overwhelmed when she goes to [REDACTED] and the medical staff bring in a large number of people to try and explain care to her. She said she gets confused and feels frustrated when asked question after question with "lots of people" staring at her. CPSI [REDACTED] asked if she had ever asked them not to do this and she said she was afraid to request that they not bring all of the student doctors in the room. She said they change ACV [REDACTED] medicine every time he goes to the hospital and it is very confusing. Nurse [REDACTED] asked if she felt like it would benefit her to have services to assist and teach in her home for a while and [REDACTED] said she felt like that would be very helpful. CPSI [REDACTED] asked about the Children's Special Services program through to the local health department. Nurse [REDACTED] said she felt like that would be a good fit but she also felt like the local PCP needed to refer home health to this home for a while until grandmother felt more confident in her ability to administer meds appropriately. [REDACTED] stated she felt like ACV [REDACTED] does better when he is at home than when he goes to school. She said she had signed releases to allow school nurse to administer sliding scale insulin to ACV if needed and has provided the school with the medication. [REDACTED] stated that she would appreciate all the help DCS could send her way. CPSI [REDACTED] spoke with [REDACTED] about current counseling options and [REDACTED] expressed concern that the "in school counseling with [REDACTED] had become "a crutch" instead of helping ACV. She said his grades were falling and he spends too much time in the [REDACTED] office and not enough time doing his work in class. She asked how she could stop this. CPSI [REDACTED] advised that [REDACTED] would have to request the counseling to stop with ACV at school. CPSI [REDACTED] stated she could refer other services for in-home counseling so [REDACTED] would not have to find a baby sitter for [REDACTED]. Nurse [REDACTED] asked about the local PCP Dr. [REDACTED]. [REDACTED] stated that the doctors and workers at [REDACTED] told her she had to bring ACV [REDACTED] to [REDACTED] for monitoring. [REDACTED] said it is very expensive and she cannot afford to go there as much as she has been requested to go there. Nurse [REDACTED] stated that a local PCP should be able to monitor ACV and adjust his meds as needed with follow ups at [REDACTED] possibly quarterly. [REDACTED] said this would be much better.

ACV [REDACTED] was at the home on this date and just waking up. He ran to his grandmother and told her he was ready to eat and needed some cereal. [REDACTED] was very appropriate with ACV and comforted him. He was clean and there was food in the home on this visit for the ACV. CPSI [REDACTED] advised she would make referral for services with health



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

department, [REDACTED] and Nurse [REDACTED] advised she would contact local PCP about home health and see if there were any other services available to assist this grandmother in the care of 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: 12/02/2013

Contact Method: Face To Face

Contact Time: 03:30 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 05:41 PM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV [REDACTED] and his grandmother at the DCS office in [REDACTED] when they stopped by to see her. ACV reported he was admitted to [REDACTED] again on 11/15/2013 and released on 11/18/2013 after his blood sugar was high at school and he was taken to [REDACTED] in [REDACTED] to be treated. ACV said then he was taken to [REDACTED] again. CPSI [REDACTED] asked what happened this time and ACV said he just "feel really sick at my stomach and then I go have my blood sugar checked and it is high." He said he is taking his medication the way he is supposed to and his grandmother gets up with him to watch and be sure he is doing it right. He said he does not sneak and eat foods that he knows he cannot have at school. [REDACTED] said she and ACV had more training about adjusting his insulin based on this blood sugar reading while at the hospital. She said she feels like she has the ability to take care of ACV and his health issues and she reports she has support with her mother (ACV's great grandmother) and her sister (ACV's great aunt). She said she wished these episodes would stop and he could just stay regulated. She said she is trying to do the things they ask her to do. CPSI [REDACTED] asked if there was something she could do to help and advised she had suggested on more than one occasion that maybe home health services would help, but was told that [REDACTED] wanted ACV to come there for monitoring at this time. [REDACTED] stated [REDACTED] had told her the same thing. The medical staff want ACV monitored by the [REDACTED] at this time. CPSI [REDACTED] advised she and the regional health nurse were looking for all the resource to assist her in the [REDACTED] County area.



**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:	11/27/2013	Contact Method:	Face To Face
Contact Time:	02:30 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	01/01/2014
Completed date:	01/01/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 05:10 PM Entered By: [REDACTED]

CPSI [REDACTED] went by the home of ACV [REDACTED] to speak with grandmother about having the [REDACTED] nurse come and talk to her and possibly ACV after Thanksgiving break. [REDACTED] and ACV [REDACTED] were both open to the suggestion of having additional resources in the home since ACV's health has gotten to the point of "too many" hospitalizations. CPSI [REDACTED] set an appointment for 12/5/2013 to meet at the home with the grandmother and if time permitted the ACV.



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:	11/21/2013	Contact Method:	Face To Face
Contact Time:	03:50 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:	Family Home	Created Date:	01/01/2014
Completed date:	01/01/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency, Safety - Child/Community, Well Being		
Contact Type(s):	ACV Interview/Observation, Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 05:31 PM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV [REDACTED] and his grandmother at their home in [REDACTED]. ACV reported he was admitted to [REDACTED] again on 11/15/2013 and released on 11/18/2013 after his blood sugar was high at school and he was taken to [REDACTED] in [REDACTED] to be treated. ACV said then he was taken to [REDACTED] again where he had to stay until yesterday. CPSI [REDACTED] asked what happened this time and ACV said he just "feel really sick at my stomach and then I go have my blood sugar checked and it is high." He said he is taking his medication the way he is supposed to and his grandmother gets up with him to watch and be sure he is doing it right. He said he does not sneak and eat foods that he knows he cannot have at school. [REDACTED] said she and ACV had more training about adjusting his insulin based on this blood sugar reading while at the hospital. She said she feels like she has the ability to take care of ACV and his health issues and she reports she has support with her mother (ACV's great grandmother) and her sister (ACV's great aunt). She said she wished these episodes would stop and he could just stay regulated. She said she is trying to do the things they ask her to do. CPSI [REDACTED] asked if there was something DCS could do to help but was told that [REDACTED] wanted ACV to come there for monitoring at this time. The medical staff want ACV monitored by the [REDACTED]. ACV appeared to be healthy and said he was safe with his grandmother in this home.



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: 11/19/2013 Contact Method: Face To Face
 Contact Time: 09:30 AM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/01/2014
 Completed date: 01/01/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): ACV Interview/Observation,Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 05:06 PM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV [REDACTED] and his grandmother at the DCS office in [REDACTED] when they stopped by to see her. ACV reported he was admitted to [REDACTED] again on 11/15/2013 and released on 11/18/2013 after his blood sugar was high at school and he was taken to [REDACTED] in [REDACTED] to be treated. ACV said then he was taken to [REDACTED] again where he had to stay until yesterday. CPSI [REDACTED] asked what happened this time and ACV said he just "feel really sick at my stomach and then I go have my blood sugar checked and it is high." He said he is taking his medication the way he is supposed to and his grandmother gets up with him to watch and be sure he is doing it right. He said he does not sneak and eat foods that he knows he cannot have at school. [REDACTED] said she and ACV had more training about adjusting his insulin based on this blood sugar reading while at the hospital. She said she feels like she has the ability to take care of ACV and his health issues and she reports she has support with her mother (ACV's great grandmother) and her sister (ACV's great aunt). She said she wished these episodes would stop and he could just stay regulated. She said she is trying to do the things they ask her to do. CPSI [REDACTED] asked if there was something she could do to help and advised she had suggested on more than one occasion that maybe home health services would help, but was told that [REDACTED] wanted ACV to come there for monitoring at this time. [REDACTED] stated [REDACTED] had told her the same thing. The medical staff want ACV monitored by the [REDACTED] at this time.

Narrative Type: Created In Error Entry Date/Time: 01/01/2014 05:28 PM Entered By: [REDACTED]

This visit was completed by [REDACTED] while CPSI [REDACTED] was in training. Corrections will be made.



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: 11/06/2013

Contact Method: Face To Face

Contact Time: 04:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 04:57 PM Entered By: [REDACTED]

CPSI [REDACTED] went to the home of Ms. [REDACTED] to check on ACV [REDACTED]. ACV reported he is doing good and feeling much better. ACV said since the time he was in the hospital in August he has had stomach cramps sometimes really bad cramps. He said he told the doctor about this pain and they had done test but did not find anything wrong. He said the doctors thought it was because of his blood sugar. ACV reported his grandmother gets up with him each morning before school to make sure he checks his blood sugar and takes his medication. He said he has it checked at school when he is supposed to. ACV said he is meeting with [REDACTED] worker [REDACTED] at the school and he goes by her office sometimes once a day. He is also being seen at [REDACTED] in [REDACTED] for counseling to deal with issues related to having a chronic illness. CPSI [REDACTED] reminded ACV that diabetes is something he will have to treat his whole life so he can be healthy. ACV said that is what all the doctors keep telling him. He said sometimes he gets frustrated because he is different. He said he has talked to [REDACTED] about this. CPSI [REDACTED] also spoke with [REDACTED] on this date who reported ACV's blood sugar is still running higher than doctors want it to but she said she and ACV monitor his shots and "sticks" the way they have been instructed. [REDACTED] said she believe the changes in blood sugar could be caused by the changes in medications when he is hospitalized. She is continuing to follow up with [REDACTED] for check ups with ACV.



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: 10/25/2013

Contact Method: Face To Face

Contact Time: 04:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 04:49 PM Entered By: [REDACTED]

CPSI [REDACTED] stopped by the home of Ms. [REDACTED] to check on ACV [REDACTED] [REDACTED]. ACV was playing outside with his younger brother [REDACTED] and ran and hugged CPSI [REDACTED] when she got out of the car. ACV said he was doing good and taking his medication like he is supposed to and checking his sugars several times a day. [REDACTED] came outside and CPSI [REDACTED] advised she was just checking on the family and [REDACTED] stated ACV had just been discharged from the hospital again after having high blood sugar levels at school. CPSI [REDACTED] asked about how the medication was being administered and if [REDACTED] was observing ACV's injections and she stated she is right there with him when he takes his medication. She said she felt like it was maybe something he was doing or eating at school because it seems to be higher when they check it at school. CPSI [REDACTED] advised how dangerous it is for this to keep occurring and she is worried about the damage the spikes in blood sugar levels may have on his health long term. [REDACTED] said she understood but they were giving him his medication just like they had been instructed. ACV was smiling and appeared healthy and happy while running and playing in the yard with [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: 10/19/2013

Contact Method: Phone Call

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/01/2014 04:31 PM Entered By: [REDACTED]

Ms [REDACTED] called to let CPSI [REDACTED] know that ACV had been admitted to the hospital again after having problems with blood sugar and feeling sick at his stomach. [REDACTED] reported ACV's blood sugar was elevated on this admission and again reported she and ACV are administering meds as instructed.



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: 10/17/2013

Contact Method: Face To Face

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 04:29 PM Entered By: [REDACTED]

CPSI [REDACTED] visited with ACV at his home with his maternal grandmother who is currently his caregiver. ACV reports he is feeling much better but was at the ER again on 10/13/2013 with high blood sugar and not feeling well. ACV reported he is taking his medication exactly like he was told to take it. [REDACTED] caregiver, also reports she is being very careful to make ACV eat right and monitor his blood sugar as instructed. She said she and ACV had attended classes at [REDACTED] to go over how to administer his meds. CPSI [REDACTED] advised she would follow up with family again and to let her know if there were changes.



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: 10/04/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/09/2013

Completed date: 12/09/2013

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2013 04:09 PM Entered By: [REDACTED]

CPSI [REDACTED] met with guardian [REDACTED] and ACV [REDACTED] at the DCS office in [REDACTED] for follow up. ACV reports he has been sick again but is feeling much better now. ACV reported that his stomach has hurt off and on ever since he was in the hospital in August. ACV looks very healthy and good. He smiled and hugged CPSI [REDACTED] when he saw her. He said he is taking his medication like he is supposed to and his numbers are "doing good". He said his grandmother makes him eat right and will not let him eat "junk" but he does like candy. He said he did not get his things from his mother but his grandmother's friend did help him get a game system and he is happy about that. He said school is going good and he is making good grades. CPSI [REDACTED] asked if they are seeing a counselor at [REDACTED] and ACV said he is talking to a counselor at school and his grandmother sees someone at the office in [REDACTED]. Half-sibling [REDACTED] was also with them on this date and wanted to play with toys. His grandmother explained this would not be along visit and she was not going to let him make a mess. CPSI [REDACTED] asked about TN CARE and Food stamps since mother had cancelled all of these services. [REDACTED] reported she has everything back now and has what she needs to care for the children. CPSI [REDACTED] reported she would check on the family next week.



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: 09/24/2013 Contact Method: Face To Face
 Contact Time: 09:45 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: School Created Date: 12/09/2013
 Completed date: 12/09/2013 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Well Being
 Contact Type(s): ACV Interview/Observation
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2013 03:36 PM Entered By: [REDACTED]

CPSI [REDACTED] went to [REDACTED] School on this date to see ACV [REDACTED]. On this date, ACV came into the office smiling and hugged CPSI [REDACTED]. CPSI [REDACTED] asked ACV how he is doing and stated he looked really strong and happy. ACV said he was feeling much better and things were going good. CPSI [REDACTED] asked if he is getting caught up in school after being out so much with the sickness and he said he is finally getting caught up and doing good in his classes. CPSI [REDACTED] asked about home and his grandmother and ACV [REDACTED] reported that he is helping his grandmother with his brother [REDACTED] some and the family is moving into a bigger home so he will have his own room. He said that there will be more room to play outside too. CPSI [REDACTED] advised she is excited that they will have more room. ACV said he will be able to stay in his same school and he is really glad about this. CPSI [REDACTED] asked if there was anything that she could help ACV with and he said that he could not think of anything and he was doing good.



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: 09/19/2013

Contact Method: Face To Face

Contact Time: 04:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 12/09/2013

Completed date: 12/09/2013

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2013 03:30 PM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV [REDACTED] grandmother [REDACTED] and half sibling [REDACTED] at the grandmother's home for follow up for this week. ACV and brother [REDACTED] were outside playing on this date. Grandmother reported ACV is doing much better and trying to do his medication exactly like he was instructed to ensure he is managing it better. CPSI [REDACTED] spoke with ACV [REDACTED] and he asked if he was allowed to have contact with his mother yet. CPSI [REDACTED] advised that right now his mother is not supposed to have any contact with the grandmother or the children because of the court proceedings. ACV [REDACTED] said his mother had been messaging him on facebook but he has not responded because his grandmother told him not to. He said his grandmother contacted his mother and tried to get some of his clothes and his backpack for school, a few toys, his game system, etc. and his mother refused to give his grandmother anything that belonged to the children. He said they checked with LE but LE said that they could not make the mother give them their stuff. ACV [REDACTED] said he would like to have his things and he did not feel like it was fair that his mother could keep them from him. CPSI [REDACTED] asked about sister [REDACTED] and was told that she decided she was going to stay with her dad, [REDACTED] for a while in [REDACTED] father already has custody of her but was staying with grandmother to attend school because she was being "smart-mouthed and talking back" to [REDACTED] CPSI [REDACTED] stated she would check on the family next week and asked them to call her if they needed her. [REDACTED] reported that she is seeking services for ACV at [REDACTED] to talk about frustration he feels about how his mother treated him.



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: 09/16/2013

Contact Method: Face To Face

Contact Time: 01:15 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/09/2013

Completed date: 12/09/2013

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2013 03:20 PM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV and his grandmother at the [REDACTED] County DCS office on this date. CPSI [REDACTED] asked ACV how he was feeling and he reported he is feeling much better and that he is doing good. He said he was watching what he eats, taking his medicine like he is supposed to and trying to get stronger. ACV said he is doing good in school and getting caught up. He said that if his sugar tests high at school they have been calling his grandmother to come and pick him up. He said he does not know why it tests higher at school but is always seems to. CPSI [REDACTED] advised that he and grandmother need to keep a close watch on this and if it becomes a pattern, they need to report it to the doctor next time he is seen. CPSI [REDACTED] advised she would be to the home to check on ACV and grandmother later in the week.



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:	09/13/2013	Contact Method:	Phone Call
Contact Time:	03:30 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/01/2014
Completed date:	01/01/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/01/2014 04:43 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] Social Worker [REDACTED] who stated that ACV had just been discharged from the hospital again after presenting with extremely high blood sugars. She said he was admitted on 9/10/2013 and monitored for a few days to see if adjustments need to be made on his medication or if the problem is application when he is in the home. CPSI [REDACTED] advised she has been following up at least weekly with family and they assure her they are administering meds as directed. CPSI [REDACTED] asked about home health for this family but was advised that the doctors would rather the ACV be monitored by [REDACTED] at [REDACTED] 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: 09/03/2013

Contact Method: Face To Face

Contact Time: 09:30 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/01/2014 04:39 PM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV [REDACTED] and his grandmother who is the caregiver at the DCS Office in [REDACTED]. ACV reported he had spent the weekend in the hospital after his blood sugar went up and did not respond to the "sliding scale" they had been given. CPSI [REDACTED] asked ACV in private if he was taking his medication and eating as he had been instructed. ACV reported his grandmother helps him every morning and afternoon with his insulin and he checks his blood sugar to make sure it is where it should be while at school. [REDACTED] also stated that she is doing exactly what she was instructed to do at [REDACTED] and monitoring his injections and dosage as instructed. She said she is making him eat the foods he is supposed to be eating to control the spikes in his blood sugar and she cannot figure out why they are continuing to have problems. ACV reported he feels much better and he is glad to be out of hospital again. ACV said he is really tired of hospitals right now.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/23/2013	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/01/2014
Completed date:	01/01/2014	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: 01/01/2014 04:34 PM Entered By: [REDACTED]

CPSI [REDACTED] received a notification from Central Intake that this case had been changed to severe abuse/near death as of this date for the allegation of medical maltreatment. All necessary notifications were sent to the appropriate people.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/22/2013	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/01/2014
Completed date:	01/01/2014	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: 01/01/2014 04:24 PM Entered By: [REDACTED]
 [REDACTED] was released from [REDACTED] on this date after being admitted on 8/14/2013. ACV was discharged on 8/13/2013 and then readmitted with stomach and digestive issues.

Narrative Type: Addendum 1 Entry Date/Time: 01/01/2014 04:25 PM Entered By: [REDACTED]
 ACV had been released and readmitted twice during this period.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/16/2013

Contact Method: Face To Face

Contact Time: 03:35 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 12/03/2013

Completed date: 12/03/2013

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/03/2013 11:51 AM Entered By: [REDACTED]

CPSI [REDACTED] went by the home of ACV [REDACTED] to check on him following his release from the hospital earlier this week. CPSI [REDACTED] asked ACV how he was feeling and he said he was feeling much better and ready to get back to school. CPSI [REDACTED] asked [REDACTED] is she had contacted the school and she stated she had provided them with all of her information and the fact that she is the custodial guardian of ACV now. The home was very neat and clean. ACV reported he was doing everything he was instructed to do to monitor his diabetes and eat right. He said his stomach has hurt a little but not as bad as when he went to the hospital. CPSI [REDACTED] advised she would follow up with ACV and his grandmother next week. ACV [REDACTED] and [REDACTED] were also at the home on this date. ACV [REDACTED] would not stop to talk to CPSI [REDACTED] but was observed to be very active and comfortable in this environment. Sister [REDACTED] reported that her father is allowing her to stay with her grandmother to go to school and she will go to his house for visits on the weekend as she has done in the past. There were no concerns for the safety, permanence, and well being of these children in this home on this 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: 08/15/2013

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Court

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Court Hearing

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/01/2014 05:43 PM Entered By: [REDACTED]

Temporary emergency custody was granted to maternal grandmother [REDACTED] with the order signed by Judge [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/14/2013

Contact Method: Face To Face

Contact Time: 02:45 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/03/2013

Completed date: 12/03/2013

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/03/2013 11:21 AM Entered By: [REDACTED]

CPSI [REDACTED] met with ACV [REDACTED] and his grandmother [REDACTED] on this date at the DCS office in [REDACTED]. [REDACTED] brought ACV by the office to report that they had just been released from the hospital because ACV had started experiencing some pain in his stomach again yesterday and the doctor decided to complete one more test to make sure he was ready for release. ACV [REDACTED] stated that he was feeling much better and very glad to be out of the hospital. CPSI [REDACTED] stated that he looked much stronger and healthier than he did when she became involved with the family. [REDACTED] said she was going to the school with ACV tomorrow to update all the school records. CPSI [REDACTED] advised she would follow up with the family before the end of the week.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/13/2013 Contact Method: Face To Face
 Contact Time: 01:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 12/03/2013
 Completed date: 12/03/2013 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Well Being
 Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/03/2013 10:41 AM Entered By: [REDACTED]

CPSI [REDACTED] went to [REDACTED] Hospital for the discharge of ACV [REDACTED] at the request of the social worker involved with the case. CPSI [REDACTED] discussed with ACV and his grandmother/caretaker the custody arrangement and the need for concentration on getting ACV better and stronger following this hospitalization. [REDACTED] said she was to be in a training in the afternoon to learn more about ACV [REDACTED] treatment. She said at this time both the other siblings are also going to be staying with her. CPSI [REDACTED] advised both ACV and [REDACTED] that the mother had been notified of the decision to place the children with the grandmother at this time. ACV was very alert and participated in the discussion. He said he knew his grandmother would take good care of him and he felt very safe with her. CPSI [REDACTED] asked about school work and getting caught up with the school work. [REDACTED] said she had been in contact with the school but they need her to bring custody papers to the school and provide all of her information so they can work with her and ACV to help him with his schoolwork. CPSI [REDACTED] advised she would follow up before the end of the week with ACV.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/12/2013

Contact Method: Face To Face

Contact Time: 04:50 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 09/04/2013

Completed date: 09/04/2013

Completed By: [REDACTED]

Purpose(s): Permanency, Service Planning

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/04/2013 04:01 PM Entered By: [REDACTED]

TL [REDACTED] completed a home visit and parent interview with [REDACTED] birth father [REDACTED]. [REDACTED] welcomed TL [REDACTED] into the home and signed the permission to enter the home form. [REDACTED] stated that he would like to gain custody of his daughter [REDACTED] and hoped that custody would not be returned to [REDACTED] mother. [REDACTED] stated that he has had custody of [REDACTED] in the past, but custody was returned to her mother after the mother received mental health treatment. [REDACTED] expressed his intent to have [REDACTED] enroll in the [REDACTED] County school system. [REDACTED] stated that he and his grandparents are the current household members and he has a lot of informal support through other family members who were also present in the home at the time of the visit. [REDACTED], paternal great grandmother, was also present and expressed that she was also in agreement with [REDACTED] living in this home. [REDACTED] stated that her husband was not well and could not be interviewed. [REDACTED] and his family were very friendly and provided all information requested. The home is a single family dwelling in a residential neighborhood. The home consists of 5 bedrooms, 2 bathrooms, a living room and kitchen. The home was well furnished, clean and organized.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/12/2013 Contact Method: Face To Face
 Contact Time: 01:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 09/03/2013
 Completed date: 09/03/2013 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Well Being
 Contact Type(s): ACV Interview/Observation
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/03/2013 12:41 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with ACV [REDACTED] when he was found to be responsive. ACV stated that his mother had caused the marks on his buttocks because "I could not answer her when she told me to clean my room." ACV stated his mother hit him with a belt. ACV stated that he knew something wrong with him and he attempted to call 911 but when they arrived his mother told them no one had called them and no one was sick. He said he could not move or answer when spoken to. Because ACV is still ill, CPSI [REDACTED] did not question him further at this time. ACV was discharged 8/13/2013 but had to be readmitted to [REDACTED] 8/14/2013 due to chest and abdominal pain.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/12/2013 Contact Method:
 Contact Time: 10:00 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/01/2014
 Completed date: 01/01/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,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: 01/01/2014 06:06 PM Entered By: [REDACTED]

The member of this household are:

[REDACTED] birth mother
 [REDACTED] 15
 [REDACTED] 13
 [REDACTED] 2

Case Summary Case Assignment:

Opening Case Summary

On 8/7/2013, at 6:47 pm, a P 1 referral was called into [REDACTED] Intake. The referral was screened into [REDACTED] County at 7:55 pm with allegations of medical maltreatment and physical abuse against [REDACTED] and unknown. The alleged victim(s) are [REDACTED]. The referral was assessed and assigned by TL [REDACTED] on 8/8/2013 at 12:00 pm to Case Manager [REDACTED]. Response is due on: 8/8/2013. It is unknown at this time if the children are of Native American descent. Juvenile Court and the District Attorney are notified of referrals and classification on a monthly basis per local protocol and policy. CM [REDACTED] will contact the referent within 30 days if necessary.

Referral number [REDACTED] states:

[REDACTED] 13 lives with his mother [REDACTED] and two sisters(Unknown). [REDACTED] is in a diabetic crisis. The child was transferred from [REDACTED] about fifty three minutes ago. The child was noticed to have severe bruising on his legs, back and buttocks. The child said that his uncle(Unknown) gave him a spanking.

It's unknown when the incident happened. The [REDACTED] talked to the mother over the phone and she's not coming to the hospital because she is disabled. On 8-3-2013, the child began complaining of chest pain. On 8-4-13, the child started acting disoriented and confused. The child then began refusing food, water and medication. The mother said she had to force feed the child; it continued on until 8-5-13 on Monday.

On Tuesday, 8-6-13 around three or four in the morning, the neighbor came banging on the door and said the child had [REDACTED] down the stairs. All day Tuesday, the child continued to act disoriented and confused. The mother called



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

the ambulance today to come and take the child to the hospital. The concerns are the bruising and may be some broken bones. The family has a long history of non compliance with the child medical treatment. The child will be admitted to the hospital and he's going to be in the critical care unit. The child has diabetes and asthma . It's unknown if the child has any special needs. The [REDACTED] wants immediate assistance.

TFACTS History checked upon case assignment.

05/16/2007; Drug Exposed Child, AIPU; Substantial Risk Sexual Abuse, AUPU; ACV [REDACTED] [REDACTED] and Unknown [REDACTED] AP [REDACTED] and [REDACTED]

04/25/2008; Environmental Neglect, No Services Needed; ACV [REDACTED] and [REDACTED] AP [REDACTED]

05/09/2011; Physical Abuse, AIPU; ACV [REDACTED] [REDACTED] AP [REDACTED]

12/29/2011; Medical Maltreatment and Psychological Harm, No Services Needed; ACV [REDACTED] [REDACTED] and [REDACTED] [REDACTED] AP [REDACTED]

10/29/2012; Physical Abuse, AUPU; ACV [REDACTED] [REDACTED] AP [REDACTED]

3/4/2013; Medical Maltreatment, NSN; ACV [REDACTED] [REDACTED] AP [REDACTED]

5/14/2013; Physical Abuse, AIPU with AP as birth father [REDACTED]

Notice of Report is sent to Juvenile Court on the first Thursday of the following month.

Notice of Case Assignment ([REDACTED] Letter) was sent.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/11/2013

Contact Method: Phone Call

Contact Time: 12:00 PM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/12/2013

Completed date: 08/12/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/12/2013 01:18 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] social worker at [REDACTED] Hospital, on the phone. [REDACTED] said that [REDACTED] was ready to be discharged from the hospital. CPSI discussed the plan for discharge with [REDACTED] regarding [REDACTED] going into the temporary custody of the MGM.

[REDACTED] called CPSI a second time. [REDACTED] said that the caregiver would need to complete training in regards to [REDACTED] medical care. [REDACTED] said that the training would need to be scheduled and completed before [REDACTED] was discharged. [REDACTED] said that this could occur on 8/12/13 at 11:00 AM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 12:36 PM Entered By: [REDACTED]

CPSI [REDACTED] interviewed [REDACTED] 15 year old half-sister of ACV. [REDACTED] said she was at her grandmother's house for "about 5 days" because [REDACTED] was sick and I did not want to get sick." She said her mother, [REDACTED] called her grandmother, [REDACTED] on Saturday to tell her that [REDACTED] had called 911 at 4:00 am because he wasn't feeling good." Then on Monday when she got out of school, she rode the bus to her house. She said [REDACTED] was at home and still not feeling well but her mother was upset because she said he was not listening to her. [REDACTED] said her mother told [REDACTED] to clean his room and "he sat there, wasn't talking at all" and she started to beat him with a belt. She said [REDACTED] "was not crying or nothing he just sat there while she was beating him." [REDACTED] said her mother told him again to clean his room and he did not respond so her mother thought he was being rebellious and "kept beating him" until my grandmother came to pick me up and her mother told her grandmother that [REDACTED] was not listening to her. She said her brother "just laid there" until her uncle [REDACTED] came over tried to get [REDACTED] to eat and [REDACTED] "fell into his arms and he took him to his room." [REDACTED] stated that her uncle asked what had happened and her mother told her uncle that she had "beat" him because he was not listening to her. [REDACTED] said she did not tell her grandmother or anyone else what happened because she was scared of what her mother would do if she found out.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2013

Contact Method: Face To Face

Contact Time: 10:45 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/01/2014

Completed date: 01/01/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

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

CPSI [REDACTED] met with [REDACTED], AP, uncle of ACV. CPSI [REDACTED] explained what had been reported to DCS. [REDACTED] said this was just a lie. [REDACTED] stated he had gone to his siste's home to try to get ACV to eat when he was not eating but at no time had he ever laid a hand on the child to hurt him or cause any injuries or bruises. He said he was not at the home when this occurred and he knew he did not hurt ACV [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2013

Contact Method: Face To Face

Contact Time: 10:30 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 12:59 PM Entered By: [REDACTED]

CPSI [REDACTED] met with maternal grandmother of all the children [REDACTED] stated that up until about 6 months ago the mother and the children were staying with her because the mother [REDACTED] had been in trouble and gone to jail for hitting [REDACTED]. She said had no idea until today when [REDACTED] told her that her daughter had hit [REDACTED]. She had been told that [REDACTED] was sick and she had advised that her daughter take him to the doctor. She said AP [REDACTED] thought that ACV was "crying wolf" and being rebellious. She said she told AP [REDACTED] she needed to get the child to the doctor and have his sugar checked. She said that she was told today about the bruising and AP hitting ACV while he was sick. She said the children had been staying with her frequently when the mother was busy with her friends and boyfriends. She said she would take the children and make sure they were kept safe. CPSI [REDACTED] took information for a possible expedited placement should one be needed for these children. [REDACTED] 2, was with his grandmother on this date. He is not very verbal and is very active. He did not want to be confined to a room while [REDACTED] spoke with CPSI [REDACTED]. The child appeared healthy and was very familiar with [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/09/2013	Contact Method:	Phone Call
Contact Time:	09:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	09/03/2013
Completed date:	09/03/2013	Completed By:	[REDACTED]
Purpose(s):	Permanency, Safety - Child/Community, Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 09/03/2013 12:40 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED], father of ACV [REDACTED] who stated that his mother had called him and told him what had been said about ACV being with him over the weekend the first of August and [REDACTED] stated that he had not seen or spoken to his son since the first weekend in June. He said that he had not "beaten" his son ever or caused the marks on his buttocks that the hospital found. He said he did not know his son had been sick or was hospitalized. He said he would like to be given information about his well-being.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2013

Contact Method: Phone Call

Contact Time: 08:30 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 12:38 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted [REDACTED] paternal grandmother who the ACV was supposed to be with last weekend according to BM [REDACTED]. [REDACTED] stated she was the mother of ACV's father [REDACTED] and she had not been in the state of TN since the first weekend in June. She stated she knew that she nor [REDACTED] nor her son [REDACTED] had even gotten to speak with ACV since that time. [REDACTED] provided contact information for her son.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/08/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 01:16 PM Entered By: [REDACTED]

CPSI [REDACTED] met with [REDACTED] Social Worker [REDACTED] about ACV [REDACTED]. Ms. [REDACTED] stated she was very familiar with ACV having worked with his family numerous times. Ms. [REDACTED] stated the ACV was not receiving proper care at home which was resulting in him having more than normal hospitalization. She said she had spoken on many occasions to the mother AP [REDACTED] and explained to her how important it was for both ACV and mother to understand and take responsibility for the monitoring of ACV and his diabetes. She said to date, ACV has missed 28 medical appointments. At this time his A1C is reported to be 18 on a scale where normal would be 6 or 7. She said she had requested multiple times that the mother bring the diabetic monitor to the clinic so the data could be downloaded so the medical team could observe the cause in the high test results. Ms. [REDACTED] stated that [REDACTED] had not complied with this request. Ms. [REDACTED] reported the ACV is still unable to be interviewed and when he does speak it is to complain of pain in his abdominal area. Ms. [REDACTED] said that further testing has been ordered to find the cause of the pain.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/08/2013 Contact Method: Face To Face
 Contact Time: 01:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 09/03/2013
 Completed date: 09/03/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 01:05 PM Entered By: [REDACTED]

CPSI [REDACTED] met with Dr. [REDACTED] child abuse specialist for [REDACTED] Hospital in [REDACTED] who advised she was going to take pictures and get more information about this case due to medical maltreatment and physical abuse. She said this ACV "could have died" because he was not receiving the proper care. She said the ACV had missed 27 medical appointments to monitor his Type 1 diabetes and presented at the hospital with severe bruising to the flanks and buttocks. CPSI [REDACTED] accompanied Dr. [REDACTED] as she took pictures of the child and the bruising. Dr. [REDACTED] stated the mother was very inconsistent providing several different versions of what happened with this child and what could have caused the bruising. Dr. [REDACTED] said in her opinion, this case was abuse/neglect. Dr. [REDACTED] advised that CPSI [REDACTED] could request a disk of the pictures she had taken as part of the medical records.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/08/2013 Contact Method: Face To Face
 Contact Time: 09:30 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 09/03/2013
 Completed date: 09/03/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview
 Contact Sub Type:

Children ConcerningParticipant(s)Narrative Details

Narrative Type: Original Entry Date/Time: 09/03/2013 12:35 PM Entered By: [REDACTED]

[REDACTED] birth mother, was interviewed by the hospital personnel and reported that (ACV) was visiting his father [REDACTED] over the weekend (Sat to Mon) for his birthday. She said he returned home on Monday where his mother found him to be lethargic, no appetite, disoriented, and unsteady on his feet. She reported that he had been having these symptoms ever since but they had worsened over the last few days with noted slurred speech and progressively more lethargy. [REDACTED] reported that on Tuesday morning she had been awakened and found EMS personnel at her door stating that someone from inside this residence had called 911. She stated it was not her and there were no concerns in the home. EMS personnel told her the report stated someone in the home was having seizures. On Wednesday morning at 3:00 am, [REDACTED] reported a neighbor "banged on her door to wake me up and told me [REDACTED] was lying at the bottom of the stairs." (The family lives in a 4 apartment building in an upstairs apartment.) [REDACTED] went downstairs to find [REDACTED] at the bottom of the stairs having [REDACTED] down the entire staircase while trying to leave the home. She reported to medical personnel that ACV had been found several times during this time period "wandering around" the area where the family lives. On Wednesday, [REDACTED] reported that ACV's breathing was more labored and he was more lethargic and mentally altered. He was said to be breathing heavily and complaining of nausea, chest pain, abdominal pain but no medical attention was sought. [REDACTED] reported on Thursday ACV could not or would not answer her at all, "fell off the couch", and was unsteady on his feet. When she found him unresponsive, she called 911 and he was transported to the hospital. This 911 call was actually made on 8/7/2013.

CPSI [REDACTED] interviewed [REDACTED] and was told first that ACV [REDACTED] had spent the entire weekend (from Friday at 400 pm until Monday at 500 pm) with his father. CPSI [REDACTED] pointed out that DCS had just indicated the father for physical abuse from an incident that occurred in June and [REDACTED] had told DCS that ACV would not have contact with his father because she would be protective. She quickly stated that she had been mistaken, that the ACV did not spend time with his father but with his half-brother and his paternal grandparents, The [REDACTED] who are from [REDACTED] and his brother's mother [REDACTED]. She stated they had come to Tennessee for ACV's birthday to celebrate since the other boy's birthday is the day following ACV's birthday. She said they stayed at the [REDACTED] in [REDACTED] and [REDACTED] had asked if she could pick [REDACTED] up on Friday for them to go out to eat and celebrate. She said while ACV was gone he called and said, "He's here" and "He's not my daddy" because his father had come with the other family members to celebrate his birthday. [REDACTED] stated that [REDACTED] was brought back home at 5:00 pm on Monday and she immediately noticed that "he wasn't himself." She said he was usually very "chatty, bouncy"



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

and on this date he seemed very tired. She said he would not eat but said "I don't want to see my daddy anymore" and went to his room saying, "I'm tired" he went to his room and laid down. She said she told him, "Baby you need to talk to me and tell me what's wrong." [REDACTED] later changed her story and said that ACV was brought home at 5:45 am to go to school for the first day but was so tired, she let him go to sleep. She said on Tuesday morning at 4:00 am she woke up to find EMS standing over her stating that someone in the home had called 911. She said she told them that she did not call and [REDACTED] did not have a phone but no one in the home was having seizures, as reported, and no one needed medical attention. She said all day Tuesday he was disoriented and could not stand on his own, falling several times but she felt it was "kinda psychological because [REDACTED] has cried wolf before" so no medical attention was sought. The child still reportedly did not eat. [REDACTED] reported that ACV fell off the couch, "was out of it", and would not eat. She said that Wednesday at 3:00 am her neighbor in the downstairs apartment was beating on her door to wake her up yelling that [REDACTED] had [REDACTED] down the stairs and was lying at the bottom of the stairs. [REDACTED] said she had the neighbor carry ACV back up stairs and she called "mobile crisis" because she still thought it was "kinda psychological". She said by Thursday morning when she was trying to get ACV to eat, he "looked at me like he never has before and I called 911." [REDACTED] said, "When [REDACTED] finally came to he told the kidney nurse 'Daddy beat me up.' CPSI [REDACTED] asked about a statement ACV had made during transport "My uncle whooped me." She said he would have to mean her brother [REDACTED] who had been "doing the uncle thing with [REDACTED] CPSI [REDACTED] asked if her brother had had access to the ACV to cause the severe bruising. [REDACTED] said, "Yes on Monday I was cooking pork chops and my brother came over. He went into [REDACTED] room to check on him while I went to the mailbox with my 2 year old." She said when she returned her brother said, "Now he'll be good" and he left. [REDACTED] said her brother moved to TN from [REDACTED] after serving time in jail for domestic assault. She said that ACV had gone to eat with her brother for his birthday and when they returned sister [REDACTED] found a cigarette and [REDACTED] lighter in ACV's belongings. She said her brother was very upset about this but she never thought that he was the one who could be responsible for the bruising. CPSI [REDACTED] asked about the situation with ACV's blood glucose and was told that [REDACTED] takes [REDACTED] blood sugar "every hour on the hour every day." [REDACTED] reported she does not know how to contact ACV's father, grandparents, [REDACTED] or her brother for CPSI [REDACTED] to verify her information.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/08/2013

Contact Method: Face To Face

Contact Time: 08:30 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

Purpose(s): Permanency, 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: 09/03/2013 12:50 PM Entered By: [REDACTED]

CPSI [REDACTED] and [REDACTED] Social Worker [REDACTED] went to the Pediatric Critical Care room of ACV [REDACTED] where ACV was sleeping and according to medical personnel still "basically unresponsive" as far as communicating with them. The child had been transferred to [REDACTED] Hospital after being stabilized at [REDACTED] in [REDACTED]. Upon arrival at [REDACTED] it was learned that ACV was said to have been taken by EMS without parental supervision to [REDACTED] when the child was found to have altered mental status, could not respond to questions asked, had not eaten for a period of at least 5 days with elevated blood sugar levels. This ACV is a juvenile diabetic who has had repeated hospitalizations for poorly managed diabetes. Mother refused to accompany the child to the hospital. [REDACTED] insisted on an adult being with the child and mother still refused. Maternal grandmother responded and followed the ambulance to [REDACTED] Hospital where the child was admitted to the Pediatric Critical Care Unit. Mother's presence was requested and after insistence by the grandmother that the mother go to the hospital, [REDACTED] was finally taken to the hospital to address the situation found by medical professionals. ACV [REDACTED] presented at [REDACTED] with "AMS, anorexia, generalized weakness, nausea, abdominal pain, and chest pain" as well as elevated blood sugar levels and once at [REDACTED] Emergency, the ACV was found to have significant bruising on his "buttocks and flanks", severe dehydration, and pneumomediastinum. It was reported that Dr. [REDACTED] Child Abuse Specialist for [REDACTED] has been called in on this case. CPSI [REDACTED] tried to get ACV to wake up enough to speak with her. It was obvious the ACV was not alert enough to communicate. On this date, the mother [REDACTED] did arrive to sit with ACV.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker: [REDACTED]

Date of Referral: 5/13/13 8:18 AM

Date of Assessment: 5/13/13 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.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

Case Manager: _____

Date: _____

Team Leader: _____

Date: _____



Tennessee Department of Children's Services

SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker: [REDACTED]

Date of Referral: 5/13/13 8:18 AM

Date of Assessment: 7/26/13 12:00 AM

Assessment Type: Closing

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.
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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:

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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: _____