



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 10/08/2013 01:23 PM [REDACTED]
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 10/08/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 10/08/2013 05:33 PM
First Team Leader Assigned: [REDACTED] Date/Time 10/09/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 10/09/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 4 Mos	Drug Exposed Infant	Yes	[REDACTED]	Birth Mother
[REDACTED]	2 Yrs 4 Mos	Drug Exposed Child	No	[REDACTED]	Birth Mother

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 search performed by [REDACTED], CM3 based off documented information.

TFACTS:

Person ID [REDACTED]
Case ID [REDACTED]

Open Court Custody/FSS/FCIP No
Closed Court Custody No
Open CPS - No
Indicated No
Fatality No
Screened out 1: 5-13-13/[REDACTED] [REDACTED]
History (not listed above):



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

6-15-05/ [REDACTED] PHA/ [REDACTED] Unfounded
7-31-13/ [REDACTED] (Case ID [REDACTED]) OOSC

County: [REDACTED]
Notification: None
School/ Daycare: None
Native American Descent: No
Directions to the house: None

Reporter / Relationship: [REDACTED]

Reporter states that today ([REDACTED]) gave birth to her daughter ([REDACTED], 1 day old). [REDACTED] and her husband ([REDACTED], age 26) live with her husband's great-grandfather ([REDACTED], age 65), along with their daughter ([REDACTED], age 1).

[REDACTED] did not tell the staff that she was prescribed medication. [REDACTED] tested positive for Benzodiazepines upon admission to the hospital. [REDACTED] also tested positive for Benzodiazepines. [REDACTED] reported that she went to the dentist (unknown) and got a prescription for Lortab for her teeth. She has not yet produced a prescription bottle for the Lortab. [REDACTED] also reported that she has taken Percocet that she got from "some people" (unknown). She reported taking Percocet when her teeth first started hurting. She did not state when she used or the last time she used drugs. It is suspected that [REDACTED] did not test positive for drugs during prenatal care.

On Friday ([REDACTED], [REDACTED]) did not show up for the first planned Cesarean section (C-section) for [REDACTED]. This morning ([REDACTED]) did not show up for the second planned C-section. The grandfather ([REDACTED]) reported that he could not get [REDACTED] up because she stayed up "partying" all night.

[REDACTED] was in respiratory distress at birth and she is still in respiratory distress. According to the nurses (unknown), the doctor (unknown) stated that if [REDACTED] did not come to the hospital today, [REDACTED] would have died.

[REDACTED] has been transported from [REDACTED] to the [REDACTED] Medical Center. She is in the NICU. It's unknown if [REDACTED] is showing signs of drug withdrawal due to respiratory failure. It is unknown if [REDACTED] is prepared for [REDACTED]. [REDACTED] is pumping milk, but it is unknown how long (or if) [REDACTED] could safely use her breast milk. [REDACTED] has not had contact with [REDACTED]. When [REDACTED] gets discharged (within the next 4 days), she can visit [REDACTED] at the [REDACTED] Medical Center. Currently, [REDACTED] and the grandparents can visit [REDACTED].

[REDACTED] was born full term. It's unknown if [REDACTED] will be able to care for [REDACTED] medically if [REDACTED] has been exposed to drugs. It's unknown if [REDACTED] has a history of prenatal abuse with [REDACTED] (age 1).

The Social Worker at [REDACTED] Medical Center is [REDACTED] and can be reached at ([REDACTED]).

Extended Intake by [REDACTED] @ 253p on 10-8-13:
[REDACTED] is not doing very well; it is unknown if she will survive or pass away.

County group emailed.
Per SDM: Investigative Track, P1 [REDACTED] TL on 10-8-13 @ 3:21 pm

Notified Child Fatality Group: [REDACTED] and [REDACTED] were copied on the email.



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 27 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: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 1 Yr 4 Mos

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: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 23 Yrs

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: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 2 Yrs 4 Mos (Est)

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: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 66 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
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 10/08/2013

Assignment Date: 10/09/2013

Street Address: [REDACTED],

City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By Classified Date
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Drug Exposed Child	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
		[REDACTED]			[REDACTED]			11/07/2013
2	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
		[REDACTED]			[REDACTED]			12/10/2013
3	[REDACTED]	[REDACTED]	Drug Exposed Child	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
		[REDACTED]			[REDACTED]			11/07/2013
4	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED]
		[REDACTED]			[REDACTED]			12/10/2013
5	[REDACTED]	[REDACTED]	Medical Maltreatment	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
		[REDACTED]			[REDACTED]			12/10/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: DEI, AIPI on [REDACTED]
DEC, AIPI [REDACTED]
DEC, AIPI [REDACTED]
MM, AIPI [REDACTED]

D. Case Workers

Case Worker: [REDACTED]

Date: 12/10/2013

Team Leader: [REDACTED]

Date: 12/11/2013

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.



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]

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:

CM [REDACTED] presents this case for closure with the allegations of DEC, and DEI as AIPI on both allegations against [REDACTED] and adds the allegation of DEC against [REDACTED] and classifies it as AIPI [REDACTED] (ACV) was born on 10/08/13 and suffered complications from her cord being wrapped around her neck. [REDACTED] was also drug exposed due to mother admitting to using Percoset and Xanax during her pregnancy, she also reported that the father [REDACTED] provided her with the drugs and used with her. Mrs. [REDACTED] admitted to using illegal substances as recently as 10/05/13. [REDACTED] (ACV) was transferred from [REDACTED] at birth to [REDACTED] to treat her for NAS, and pulmonary edema due to the cord around the child's neck during gestation. [REDACTED] had a C-Section scheduled for 3 different dates and no-showed all 3 times, on 10/06/13 she reported that she was cramping and sick but did not go to the hospital or attend the scheduled C-Section the next day. On 10/09/13 [REDACTED] was transported to [REDACTED] Hospital in [REDACTED] to receive additional treatment. On 10/08/13 [REDACTED] (ACV) was placed in a respite home due to no family resources being located. On 10/11/13 both [REDACTED] (ACV) and [REDACTED] (ACV) were placed in custody due to issues with all 3 parents, [REDACTED] was placed in a relative placement and [REDACTED] remained in [REDACTED]. Both children are currently safe, parents have supervised visitation after clean drug screens. SDM safety assessment completed on 10/08/13 and assessed children as conditionally safe due to parents drug use, and mental ability to care for the children.

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

None

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

[REDACTED] admitted to using Percoset and Xanax unprescribed during pregnancy and as recently as 10/05/13. She reported using these substances for a minimum of the last 3-4 months and that they were provided by her husband [REDACTED] and that Mr. [REDACTED] also used these substances with her. [REDACTED] refused to drug screen and was uncooperative with CM and the investigation. He exhibited paranoid behaviors, and was very jumpy and seemed to be all over the place with his speech, behaviors and emotions.

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

Person ID [REDACTED]
Case ID [REDACTED]

Open Court Custody/FSS/FCIP No
Closed Court Custody No
Open CPS - No
Indicated No
Fatality No
Screened out 1: 5-13-13/[REDACTED] LOS/[REDACTED]
History (not listed above):
6-15-05/[REDACTED] PHA/[REDACTED] / Unfounded
7-31-13/[REDACTED] (Case ID [REDACTED] OOSC

County: [REDACTED]
Notification: None
School/ Daycare: None
Native American Descent: No
Directions to the house: None



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]

Reporter / Relationship: [REDACTED]

Reporter states that today [REDACTED] gave birth to her daughter [REDACTED] 1 day old). [REDACTED] and her husband [REDACTED], age 26) live with her husband's great-grandfather [REDACTED], age 65), along with their daughter ([REDACTED] age 1).

[REDACTED] did not tell the staff that she was prescribed medication. [REDACTED] tested positive for Benzodiazepines upon admission to the hospital. [REDACTED] also tested positive for Benzodiazepines. [REDACTED] reported that she went to the dentist (unknown) and got a prescription for Lortab for her teeth. She has not yet produced a prescription bottle for the Lortab. [REDACTED] also reported that she has taken Percocet that she got from "some people" (unknown). She reported taking Percocet when her teeth first started hurting. She did not state when she used or the last time she used drugs. It is suspected that [REDACTED] did not test positive for drugs during prenatal care.

On Friday (10-4-13), [REDACTED] did not show up for the first planned Cesarean section (C-section) for [REDACTED]. This morning (10-8-13), [REDACTED] did not show up for the second planned C-section. The grandfather ([REDACTED] reported that he could not get [REDACTED] up because she stayed up "partying" all night.

[REDACTED] was in respiratory distress at birth and she is still in respiratory distress. According to the nurses (unknown), the doctor (unknown) stated that if [REDACTED] did not come to the hospital today, [REDACTED] would have died.

[REDACTED] has been transported from [REDACTED] to the [REDACTED] Medical Center. She is in the NICU. It's unknown if [REDACTED] is showing signs of drug withdrawal due to respiratory failure. It is unknown if [REDACTED] is prepared for [REDACTED] is pumping milk, but it is unknown how long (or if) [REDACTED] could safely use her breast milk. [REDACTED] has not had contact with [REDACTED]. When [REDACTED] gets discharged (within the next 4 days), she can visit [REDACTED] at the [REDACTED]. Currently, [REDACTED] and the grandparents can visit [REDACTED].

[REDACTED] was born full term. It's unknown if [REDACTED] will be able to care for [REDACTED] medically if [REDACTED] has been exposed to drugs. It's unknown if [REDACTED] has a history of prenatal abuse with [REDACTED] (age 1).

The Social Worker at [REDACTED] is [REDACTED] and can be reached at [REDACTED].

Extended Intake by [REDACTED]

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

[REDACTED] admitted to using Percoset and Xanax during her pregnancy, she also reported that the father ([REDACTED] provided her with the drugs and used with her. Mrs. [REDACTED] admitted to using illegal substances as recently as 10/05/13. She missed 3 scheduled C-Sections, and when [REDACTED] was born on [REDACTED] she was in distress from the cord being wrapped around her neck, Child also ingested fecal matter during gestation and went into distress. Father of [REDACTED] was uncooperative, he refused a drug screen and had behaviors that were consistent with drug use.

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:	12/12/2013	Contact Method:	
Contact Time:	05:32 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	12/12/2013
Completed date:	12/12/2013	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: 12/12/2013 04:32 PM Entered By: [REDACTED]
 Date: 12-12-13
 Purpose: Case Review for Closure

TL [REDACTED] reviewed this case and approving for closure. The Classification summary will be forwarded to the Juvenile Court. The case will be filed under the caregiver [REDACTED].

Date of Referral: 10-8-13
 Initial Notification to Juvenile Court:
 Notification to DA: NA
 Law Enforcement Notification: NA
 CAC Notification: NA
 SDM Safety Assessment:
 FAST: NA
 CS-0740 Sent to Juvenile Court:
 Case Closure Date:

Letters A and attachments were mailed out to [REDACTED] and [REDACTED]



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 12/11/2013 Contact Method: Correspondence
 Contact Time: 01:00 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 12/12/2013
 Completed date: 12/12/2013 Completed By: [REDACTED]
 Purpose(s): Service Planning
 Contact Type(s): CPIT (Child Protective Investigative Team)
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/12/2013 09:43 AM Entered By: [REDACTED]
 12/11/13 approximately 1:00pm, CM [REDACTED] presented the following case to the [REDACTED] County CPITeam with the following members present [REDACTED] (CPS Team Leader), [REDACTED], [REDACTED] ([REDACTED] County Juvenile Court), [REDACTED] ([REDACTED] County Sheriff Dept.) and [REDACTED] ([REDACTED] Police Dept.). Final recommendation was for Allegation (DEI) to be Indicated and Perpetrator [REDACTED] and [REDACTED] to be Indicated. All members agreed with the presented classification and signed the appropriate form. Forms have been placed in the hard file. No prosecution pending within this jurisdiction.



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:

Contact Time: 03:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 11/06/2013

Completed date: 11/07/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/06/2013 02:35 PM Entered By: [REDACTED]

CM [REDACTED] was assigned this case on: [REDACTED]

Priority Response Code: 1

Allegations Assessed and Assigned by Central Intake: DEC, DEI

Notification to Juvenile Court: 10/09/13/13

Notification to the Reporter: 10/09/13/13

CM [REDACTED] presents this case for closure with the allegations of DEC, and DEI as AIPI on both allegations against [REDACTED] and adds the allegation of DEC against [REDACTED] and classifies it as AIPI. [REDACTED] (ACV) was born on [REDACTED] and suffered complications from her cord being wrapped around her neck. [REDACTED] was also drug exposed due to mother admitting to using Percoset and Xanax during her pregnancy, she also reported that the father ([REDACTED]) provided her with the drugs and used with her. Mrs. [REDACTED] admitted to using illegal substances as recently as 10/05/13. [REDACTED] (ACV) was transferred from [REDACTED] at birth to [REDACTED] to treat her for NAS, and pulmonary adema due to the cord around the child's neck during [REDACTED] had a C-Section scheduled for 3 different dates and no-showed all 3 times, on 10/06/13 she reported that she was cramping and sick but did not go to the hospital or attend the scheduled C-Section the next day. On 10/09/13 [REDACTED] was transported to [REDACTED] in [REDACTED] to receive additional treatment. On 10/08/13 [REDACTED] (ACV) was placed in a respite home due to no family resources being located. On 10/11/13 both [REDACTED] (ACV) and [REDACTED] (ACV) were placed in custody due to issues with all 3 parents, [REDACTED] was placed in a relative placement and [REDACTED] remained in [REDACTED]. Both children are currently safe, parents have supervised visitation after clean drug screens. SDM safety assessment completed on 10/08/13 and assessed children as conditionally safe due to parents drug use, and mental ability to care for 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:	10/17/2013	Contact Method:	Face To Face
Contact Time:	02:45 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/06/2013
Completed date:	11/06/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Service Planning		
Contact Type(s):	Alleged Perpetrator Interview, Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 11/06/2013 12:53 PM Entered By: [REDACTED]

PC: (Purpose of Contact)

This case note is a reflection of the CFTM summary form written by: [REDACTED]

Situation that Prompted the CFTM:

CPS received a referral for Drug Exposed Infant and Drug Exposed Child. The children were removed and placed into DCS custody.

C: (Content)**Strengths Discussed:**

[REDACTED] and family are calling regularly to check on [REDACTED]

Family support for the parents.

[REDACTED] is placed with family. [REDACTED] is doing well, sleeping all night, taking naps.

Needs or Concerns Discussed:

[REDACTED] medical needs, Respiratory distress, not getting blood to her lungs, improving gradually.

Drug concerns regarding the parents

Clothing for [REDACTED]

Meeting Summary:

Introductions were made, purpose of CFTM was discussed. Confidentiality agreement and exceptions were discussed and signed. Ground rules addressed. CFTM Summary form was discussed. The children were placed into custody. The family reported that Court is reset for [REDACTED]. The parents were appointed attorneys, GAL was discussed. Discussed what happens when a child enters DCS custody, EPSDT/Physical and dental will be completed on [REDACTED]. [REDACTED] will be completed by the hospital. [REDACTED] is still placed at [REDACTED] Hospital. There is a no contact order between the parents and children until they pass two drug screens. The drug screens will be requested at [REDACTED].



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Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

random. This was ordered by the Judge. One drug screen will be completed today [REDACTED] expressed concerns regarding Ms. [REDACTED]. Ms. [REDACTED] asked if background checks were done on Ms. [REDACTED]. CM [REDACTED] stated that yes checks were done on Ms. [REDACTED]. Ms. [REDACTED] stated that she would be willing to submit to a drug screen at any time requested. Discussed the Permanency Plan CFTM, and it was scheduled for Nov, 6th at 1:00 PM. [REDACTED] and [REDACTED] do not work. Discussed the upcoming court hearings and what to expect. Parents have attorneys. [REDACTED] father [REDACTED] was invited to the CFTM today and he stated that he did not want to come per Ms. [REDACTED] and [REDACTED] are technically not together. [REDACTED] is staying [REDACTED] home, who is Ms. [REDACTED] father. [REDACTED] lives there also, [REDACTED] is his contact number. [REDACTED] is [REDACTED] contact number. [REDACTED] is [REDACTED] contact number. [REDACTED] is on a ventilator at [REDACTED]. Ms. [REDACTED] reported that [REDACTED] was taken off all of her blood pressure medications. [REDACTED] reported that she spoke with a Nurse at [REDACTED] who reported that [REDACTED] is stable. [REDACTED] has allergies, is on a medication from Walgreens, [REDACTED] does not know the kind of medication that it is. [REDACTED] pulls at her ears sometimes. [REDACTED] is [REDACTED] Dr. Visitation will be addressed further in the Permanency Plan CFTM. Ms. [REDACTED] could not identify any further needs regarding placement for [REDACTED]. [REDACTED] calls [REDACTED] several times a day to check on [REDACTED] and get updates regarding her condition. This is encouraged by DCS.

Efforts Made for the Child and/or Family to Reduce Trauma:

[REDACTED] was placed in a Kinship placement. [REDACTED] will bring [REDACTED] special blanket to the DCS office.

Decisions Made:

The children will continue in DCS custody.

Was the progress toward achieving permanency reviewed? Yes

Visitation plans for the next three months:

- a.) Parent/Child visits: No contact until all parents provide two clean drug screens.
- b.) Sibling visits: To be determined when [REDACTED] is released from [REDACTED]

O: (Observation)

This facilitator met with [REDACTED] following the CFTM held on 10/17/13- for an informal debriefing.

P: (Plan)**Action Steps:****Permanency Plan CFTM**

Person Responsible: DCS, Parents, Attorneys

By When: 11/6/13 at 1:00 PM at the [REDACTED] Co. DCS office

[REDACTED] will go to Walgreens and get [REDACTED] allergy medication and will bring it by the DCS office tomorrow morning and will bring some clothing for [REDACTED] for [REDACTED] to take to the foster home tomorrow.

Person Responsible: [REDACTED]

By When: 10/18/13

Court is scheduled for Dec. 12th at [REDACTED] Co Juvenile Court

Person Responsible: DCS, Parents, Attorney

By When: 12/12/13 at 9:00 AM

Person Responsible:

By When:



Tennessee Department of Children's Services
Case Recording Summary

Case Id:	██████████	Case Name:	██
Case Status:	Close	Organization:	██

Did most members agree with the Team's decision(s)? Yes

a) If not, what are the concerns of those who disagreed?

No disagreement noted regarding placement, medical, etc that was discussed in the meeting.

Who are some of the other individuals that can be invited to join this Child and Family Team? Attorneys, Providers

Date of next Child and Family Team meeting



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: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Court

Created Date: 11/06/2013

Completed date: 11/06/2013

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: 11/06/2013 02:12 PM Entered By: [REDACTED]

CM [REDACTED] attended a 3 day hearing for [REDACTED] and [REDACTED]. In attendance was [REDACTED] (mother), [REDACTED] (FSW) [REDACTED] (CPS), [REDACTED] (father) [REDACTED] Judge [REDACTED] and [REDACTED] both asked for and were appointed attorneys. [REDACTED] reported she would be retaining [REDACTED] was appointed [REDACTED], and the GAL was appointed as [REDACTED]. Court hearing was rescheduled for 12/12/13. CM asked the court to maintain a no contact order for the parents until they could pas 2 clean screens and that motion was approved [REDACTED] the father of [REDACTED] was not present for this hearing.



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: 10/11/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 11/06/2013

Completed date: 11/06/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/06/2013 01:59 PM Entered By: [REDACTED]

CM [REDACTED] and TL [REDACTED] brought the family into the office to discuss relative placement options. TL [REDACTED] and CM [REDACTED] reviewed all relatives for placement with the mother and family, after discussing the criteria for placement of a child in DCS custody and exploring the background initial information of possible relatives the team agreed on [REDACTED] a maternal great aunt. Mrs. [REDACTED] arrived at the DCS office and completed the initial interview with CM [REDACTED] and TL [REDACTED] it was determined and agreed by all team members that [REDACTED] and her husband would be appropriate for placement. CM [REDACTED] contacted [REDACTED] on-call custodial placement specialist who completed the custodial expedited, around 6:30 CM received a call from [REDACTED] and she reported that [REDACTED] had been approved for placement of [REDACTED]. CM [REDACTED] then transported [REDACTED] from the respite home in [REDACTED] to the McDonalds in [REDACTED] where he met [REDACTED] to exchange the child. CM completed placement checklist and signed appropriate paperwork, CM advised Mrs. [REDACTED] of the meeting scheduled for 10/17/13 and she stated she would attend.



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:	10/11/2013	Contact Method:	Face To Face
Contact Time:	11:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	11/06/2013
Completed date:	11/06/2013	Completed By:	[REDACTED]
Purpose(s):	Permanency		
Contact Type(s):	Parent/Caretaker Interview, Alleged Perpetrator Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/06/2013 12:29 PM Entered By: [REDACTED]

CM [REDACTED] met with [REDACTED] the father of [REDACTED] at his residence located at [REDACTED]. CM knocked on the door and [REDACTED] answered, CM asked for [REDACTED] and she let CM in and we sat in the living room. CM introduced himself and explained that there had been a referral on [REDACTED] involving her not being with her mother. Mr. [REDACTED] reported that he was the child's father and that he resided at this address with his mother [REDACTED]. CM explained that [REDACTED] was placed in the care of a respite parent due to the fact that there were no suitable relatives that could be located on 10/07/13. CM explained that there was a meeting scheduled for 10/17/13 to address the safety concerns of [REDACTED] and her future placement. Mr. [REDACTED] discussed if he would be a possible placement for [REDACTED] and CM explained that there was a process for this that we would review at the meeting. Mr. [REDACTED] stated that he could attend the meeting, we then discussed his past and he reported that he was currently on supervised probation and has been for the last 7 years and that back in 2003 he received an aggravated assault charge for carrying a handgun and arguing with a neighbor, he also reported that a few years ago he received a shoplifting charge. Mr. [REDACTED] stated that he currently resided with his mother and the apartment was hers he slept on the couch as it was a 1 bedroom. He reported he receives disability and SSI and receives around \$700 monthly. Mr. [REDACTED] reported that he was prescribed Suboxone through [REDACTED] Care with Dr. [REDACTED]. Mr. [REDACTED] felt like at this time he was not prepared to care for [REDACTED] due to his living arrangements and financial ability. CM asked Mr. [REDACTED] to come by the DCS office on 10/11/13 to complete a drug screen and he stated he would, CM asked him what he would fail the screen for and he reported just the Suboxone. CM provided Mr. [REDACTED] with contact information and ended the visit.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/10/2013

Contact Method: Face To Face

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 11/06/2013

Completed date: 11/06/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/06/2013 12:45 PM Entered By: [REDACTED]

CM [REDACTED] attempted to locate [REDACTED] the father of [REDACTED] at the address provided by child's mother ([REDACTED] [REDACTED]). CM arrived at the address and found no one home.

Narrative Type: Addendum 1 Entry Date/Time: 11/06/2013 12:46 PM Entered By: [REDACTED]

This recording should be an attempted face to face with the father of [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: 10/09/2013

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/11/2013

Completed date: 10/11/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/11/2013 10:02 AM Entered By: [REDACTED]

10/09/13 approximately 10:00 am, CM [REDACTED] forwarded a copy of this report to the [REDACTED] County Juvenile Court via US mail.

10/09/13 approximately 10:00 am, CM [REDACTED] forwarded the Confidential Notification Letter for Reporter to the referent as listed. A copy has been placed in the file.

10/09/13 approximately 10:00 am, CM [REDACTED] forwarded a copy of this report to the [REDACTED] County Child Protective Investigative Team, including: [REDACTED] County Juvenile Court, [REDACTED] County District Attorney's Office, [REDACTED] County Sheriff's Dept, [REDACTED] Police Dept, and the [REDACTED] via US mail and fax.



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: 10/08/2013 Contact Method: Face To Face
 Contact Time: 09:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 10/11/2013
 Completed date: 10/11/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Initial ACV Face To Face,Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/11/2013 09:57 AM Entered By: [REDACTED]

CM [REDACTED] arrived at [REDACTED] hospital around 9:00 p.m. and was briefed by hospital staff, [REDACTED] (nurse) reported that Mother was scheduled to deliver infant on [REDACTED] C section by doctor's request. Mother did not show up for appointment at hospital and was rescheduled for [REDACTED] Mother reported having cramping and vomiting on Sunday evening and did not attend the 10/7 appointment, but rescheduled again for [REDACTED]. Mother did not show up for her rescheduled appointment on Tuesday morning and was contacted by hospital personnel. Great grandfather woke up mother and took her to the hospital. Infant was delivered in respiratory distress and was placed on a ventilator and 2 IV's.

Infant is now being sedated and still on ventilator and 2 IV's but stable.

CM met with mother at the hospital and she admitted to environmental issues within the home located at [REDACTED]. She also reported taking oxycodone, percocet, and lortab, all of which were unprescribed except the lortab she stated that she had taken some of these pills over the weekend, [REDACTED] also stated [REDACTED] (father) would screen for the same drugs that she did or would and that they used together, she stated that the father purchased the drugs and provided them to her. CM discussed with the mother why she did not show up for the C-Sections that were scheduled and she stated that the one scheduled for Friday they did not call to confirm the time until late Thursday afternoon and she had went with her mother to [REDACTED] so she was already out of town by the time the hospital called, she stated she rescheduled the procedure for Monday, she then stated that Sunday night she had been sick, cramping, and bleeding and did not feel well so she did not go and rescheduled again for 6:00 a.m. on Tuesday, but then over slept on Tuesday and was awakened by the grandfather telling her the hospital was on the phone, she then got up and came to the hospital. Mother also reports that father did not want her to have a C section and she has been keeping her 1 year old child with other individuals because he is not fond of her (he is not her father). Mother talks about guns in the home and many dogs. Mother states that father would be positive for the same substances she is. Mother agreed to place her 1 yr old in DCS respite care and was unable to give appropriate family members names to pursue placement. CM [REDACTED] then completed required paperwork with Mrs. [REDACTED] CM [REDACTED] explained the Parents Bill of Rights, Client Rights Handbook, Native American Heritage Veto Verification, HIPAA Notice of Rights Privacy Practice, MRS pamphlet with how DCS cases are investigated, and the Equal access to programs and services forms. Family signed all needed forms and they are located in the case file. CM gathered information from the family to initiate/ update the Genogram, FAST, and FFA (if needed). Family signed Authorization of Release of Information and this is located in the case file. CM [REDACTED] also completed the SDM Safety Assessment on this date. The IPA was signed



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

and explained as well as the process for respite care. Cm asked [REDACTED] to contact him when she was released from the hospital.

CM met with infant, [REDACTED] N.I.C.U. and spoke with nurse, she reported that child was sedated and has been placed on a ventilator due to respiratory distress. Infant continues to be monitored closely for withdrawal concerns but with the medication receiving may mask some of the withdrawal symptoms. Infant is also receiving morphine and fluids via IV. Hospital staff report that infant's cord was wrapped around her neck at birth.



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: 10/08/2013 Contact Method:
 Contact Time: 06:00 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 10/08/2013
 Completed date: 10/09/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/09/2013 11:30 AM Entered By: [REDACTED]

10/8/13 approximately 6pm, TL [REDACTED] received call from CM [REDACTED] regarding this case. CM reported that he has met with the father and great grandfather to obtain contact with the 1 yr old sibling. Great grandfather and biological father of [REDACTED] refused to allow entrance to the home. CM reports the outside to be quite cluttered and concerning. Great grandfather had a gun and great dane at the entrance of home and both were quite uncooperative. Father stated that he did not want mother to have a C section and he wanted her to have 4 children. Father refused a drug screen and would not allow CM to enter the home. CM met with mother at the hospital and she admitted to environmental issues within the home. She also reported taking oxycodone, percocet, and lortab, all of which were unprescribed except the lortab. Mother also reports that father did not want her to have a C section and she has been keeping her 1 year old child with other individuals because he is not fond of her (he is not her father). Mother talks about guns in the home and many dogs. Mother states that father would be positive for the same substances she is. Mother agreed to place her 1 yr old in DCS respite care and was unable to give appropriate family members names to pursue placement.

TL and CM reviewed this case again on 10/9/13 approximately 830am, CM reported that mother was scheduled to deliver infant on 10/4/13 by C section by doctor's request. Mother did not show up for appointment at hospital and was rescheduled for 10/7/13. Mother reported having cramping and vomiting on Sunday evening and did not attend the 10/7 appointment, but rescheduled again for Tuesday, 10/8/13. Mother did not show up for her rescheduled appointment on Tuesday morning and was contacted by hospital personnel. Great grandfather woke up mother and took her to the hospital. Infant was delivered in respiratory distress and was placed on a ventilator and 2 IV's.

Infant is now being sedated and still on ventilator and 2 IV's but doing better and hospital personnel state she is "out of the woods". CM has extensive concerns regarding this baby or the 1 yr old returning to their current home.

CM and TL developed the following next steps: CM will continue further attempts to reach the biological father of the 1 yr old. CM will contact TC and RGC [REDACTED] to review this case and file a petition. CM will also gather additional information regarding aunts available to be resources.



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: 10/08/2013

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/08/2013

Completed date: 10/08/2013

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/08/2013 05:36 PM Entered By: [REDACTED]

10/8/13 approximately 5pm, TL [REDACTED] researched DCS history regarding this family and found there to be one prior out of state courtesy request from [REDACTED] CPS personnel stating that the maternal grandparents had taken [REDACTED] to [REDACTED] without consent of parents and were charged with kidnapping. Charges were pending transfer to [REDACTED] County TN. Courtesy request assigned and worked by CPS Investigator [REDACTED].

An additional CPS referral was found where [REDACTED], mother was listed as an alleged victim of Physical Abuse by [REDACTED] on 6/14/05. Case was unfounded by CPS Investigator, [REDACTED] in [REDACTED] County.

No other DCS history found.



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: 10/08/2013 Contact Method: Face To Face
 Contact Time: 05:00 PM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 10/11/2013
 Completed date: 10/11/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Initial ACV Face To Face
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/11/2013 09:49 AM Entered By: [REDACTED]

CM received a P-1 referral on 10/08/13 regarding [REDACTED] (1) and [REDACTED] (2 days) with allegations on the mother of both children [REDACTED] for DEI, and DEC. The 2 day old infant [REDACTED] is currently in [REDACTED] after being delivered by C-Section and is currently in respiratory distress and was placed on a ventilator and 2 IV's. The location of [REDACTED] (10 is currently unknown).

CM [REDACTED] arrived at the address of [REDACTED] (great grandfather [REDACTED] which is also the home of [REDACTED] (biological father of [REDACTED] and [REDACTED] (mom). When CM arrived there was a Great Dane (dog) roaming the yard unchained, CM [REDACTED] was unable to exit the vehicle until [REDACTED] exited the home and controlled the dog, CM walked up on the porch of the home and introduced himself and asked if [REDACTED] was at this home and Mr. [REDACTED] reported she was not she was with her grandparents, CM [REDACTED] also noticed that Mr. [REDACTED] was wearing a holster and a gun on his side. CM asked Mr. [REDACTED] what was the gun for and he stated he had a permit to carry a weapon. CM then asked Mr. [REDACTED] if he knew how to locate [REDACTED] and he stated they were living somewhere in [REDACTED] he stated that the grandparents were [REDACTED] and [REDACTED]. CM asked Mr. [REDACTED] where [REDACTED] (father) was and he stated he was at the hospital with [REDACTED] Mr. [REDACTED] gave CM a phone number for the grandparents of [REDACTED]. As we continued to speak [REDACTED] called from the hospital and Mr. [REDACTED] allowed CM to speak with her, CM spoke with [REDACTED] (mom) and explained the referral, CM asked her where [REDACTED] was located and she stated that she was with her sister [REDACTED] who lives in [REDACTED] while CM [REDACTED] was speaking to [REDACTED] on the phone [REDACTED] arrived at the home. CM explained to [REDACTED] that he needed to see [REDACTED] and that he would need to approve the place she was staying, [REDACTED] reported that she would call her sister and have her call CM. CM explained to [REDACTED] that after he got the placement for [REDACTED] that he come by [REDACTED] and met with her to complete paperwork and discuss [REDACTED]. CM then began to speak with [REDACTED] and he stated that [REDACTED] was with [REDACTED] mother and father and that they were at [REDACTED] home in [REDACTED]. CM then asked Mr. [REDACTED] to complete a drug screen, and at that time he began getting really upset, questioning why and stated that he had done nothing wrong, he began to explain to CM [REDACTED] that he was injured and showed CM a scar on his left shoulder, he stated that he was diagnosed with depression and anxiety, CM asked him who was treating him and what prescriptions he was taking and that any valid prescriptions would not be held against him and [REDACTED] reported that he was not receiving treatment as he had lost his coverage and had no prescriptions. CM explained that he had drug concerns with the mother and that he was searching for appropriate adults to place one or both of the children with to which he stated "the other girl aint mine" CM again asked [REDACTED] to consent to a drug screen and he



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization: [REDACTED]

stated he didn't feel comfortable with this situation and began to become upset, he sat on the driveway and was ranting to CM about him not doing anything, or feeling comfortable, and then began hitting his head on the ground, at this point relented on the drug screen as it was apparent that [REDACTED] has significant mental health issues and was possibly on some unprescribed or illegal drugs. CM [REDACTED] then asked to see the inside of the home where the family had been residing with the 1 year old [REDACTED] [REDACTED] (step-father) refused to allow CM access to the home, CM then returned to Mr. [REDACTED] and asked if he could see the home and Mr. [REDACTED] reported that it had not been cleaned and denied access to the home. CM observed the outside to be quite cluttered and concerning. [REDACTED] (father) stated that he did not want mother to have a C section and he wanted her to have 4 children. Father refused a drug screen and would not allow CM to enter the home.

CM [REDACTED] arrived at [REDACTED] around 6:00 p.m. and located D-3, the front door was open when CM arrived and out came a lady who introduced herself as [REDACTED] (aunt) she stated that her sister [REDACTED] had left [REDACTED] with her and her parents and that [REDACTED] was with her parents but would be here in a few minutes. Within a few minutes [REDACTED] and [REDACTED] arrived with [REDACTED] CM observed her to be clean, appropriately dressed and well cared for. CM explained that he needed to make sure that the placement for the child was appropriate, [REDACTED] reported that [REDACTED] has been with her parents on and off for the past few weeks, they ([REDACTED] [REDACTED] and [REDACTED]) began to report to CM that [REDACTED] (step-dad) did not need to be around either child and that he was using drugs and not seeking treatment for his mental health issues, they also began to tell CM [REDACTED] that the home located at [REDACTED] was not clean, or safe for the child as there was dog feces in the home and holes in the floors. CM explained that he would address any concerns after the children were placed and safe [REDACTED] reported that her and [REDACTED] had been arrested in July of this year for custodial interference and that [REDACTED] had served 10 days in jail and bonded out and will go to court next month, [REDACTED] spent 78 days in jail and took a plea deal for time served and got out last week. CM explained that there was a process that would need to be completed involving background checks and approvals to allow the child to remain with the relatives., CM [REDACTED] began a quick background exploration on all potential resources and found that [REDACTED] and her husband [REDACTED] were not qualifiers due to criminal charges; [REDACTED] and [REDACTED] were not qualifiers due to criminal charges, CM [REDACTED] then contacted the mother [REDACTED] [REDACTED] and explained to her that the family resources were not going to be able to maintain [REDACTED] and we discussed other family but located none. CM suggested that we look for a respite placement and explained this option to the mother; she agreed to sign an IPA allowing the child to go into respite until further investigation could be conducted CM [REDACTED] explained to mom that he would come by the hospital and get the IPA and paperwork signed after he dropped the child off. CM spoke with TL [REDACTED] and reviewed the safety plan and TL approved the respite and IPA. CM [REDACTED] contacted placement worker [REDACTED] and she located a placement for the child with [REDACTED] in [REDACTED] CM completed the placement by transporting the child to meet the respite parent at the [REDACTED] in [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: 10/08/2013

Contact Method:

Contact Time: 04:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/11/2013

Completed date: 10/11/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/11/2013 09:52 AM Entered By: [REDACTED]

Case Summary

TFACTS History search performed by [REDACTED] based off documented information.

TFACTS:

Person ID [REDACTED]

Case ID [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Indicated No

Fatality No

Screened out 1: 5-13-13/ [REDACTED] LOS/ [REDACTED]

History (not listed above):

6-15-05/ 3228771/ PHA/ [REDACTED] / Unfounded

7-31-13/ [REDACTED] (Case ID [REDACTED] OOSC

County: [REDACTED]

Notification: None

School/ Daycare: None

Native American Descent: No

Directions to the house: None

Reporter / Relationship: [REDACTED]

Reporter states that today ([REDACTED] gave birth to her daughter [REDACTED], 1 day old). [REDACTED] and her husband [REDACTED] (26) live with her husband's great-grandfather ([REDACTED], age 65), along with their daughter [REDACTED] (age 1).



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] did not tell the staff that she was prescribed medication. [REDACTED] tested positive for Benzodiazepines upon admission to the hospital. [REDACTED] also tested positive for Benzodiazepines. [REDACTED] reported that she went to the dentist (unknown) and got a prescription for Lortab for her teeth. She has not yet produced a prescription bottle for the Lortab. [REDACTED] also reported that she has taken Percocet that she got from "some people" (unknown). She reported taking Percocet when her teeth first started hurting. She did not state when she used or the last time she used drugs. It is suspected that [REDACTED] did not test positive for drugs during prenatal care.

On Friday (10-4-13), [REDACTED] did not show up for the first planned Cesarean section (C-section) for [REDACTED]. This morning [REDACTED] did not show up for the second planned C-section. The grandfather ([REDACTED]) reported that he could not get [REDACTED] up because she stayed up "partying" all night.

[REDACTED] was in respiratory distress at birth and she is still in respiratory distress. According to the nurses (unknown), the doctor (unknown) stated that if [REDACTED] did not come to the hospital today, [REDACTED] would have died.

[REDACTED] has been transported from [REDACTED] Hospital to the [REDACTED] Medical Center. She is in the NICU. It's unknown if [REDACTED] is showing signs of drug withdrawal due to respiratory failure. It is unknown if [REDACTED] is prepared for [REDACTED] is pumping milk, but it is unknown how long (or if) [REDACTED] could safely use her breast milk. [REDACTED] has not had contact with [REDACTED]. When [REDACTED] gets discharged (within the next 4 days), she can visit [REDACTED] at the [REDACTED] Medical Center. Currently, [REDACTED] and the grandparents can visit [REDACTED].

[REDACTED] was born full term. It's unknown if [REDACTED] will be able to care for [REDACTED] medically if [REDACTED] has been exposed to drugs. It's unknown if [REDACTED] has a history of prenatal abuse with [REDACTED] (age 1).



Family Functional Assessment

Case Name: _____

Case ID: _____

Primary Case Worker: _____

Begin Date: 11/07/2013

Last Review By: _____

Last Review Date: _____

I. Current Circumstances:

A. Reason For Involvement:

11/07/2013 - [REDACTED] - FFA - Family - TFACTS History search performed by [REDACTED], CM3 based off documented information.

TFACTS:

Person ID [REDACTED]

Case ID [REDACTED]

Open Court Custody/FSS/FCIP NoClosed Court Custody No

Open CPS - No

Indicated NoFatality NoScreened out 1: 5-13-13/ [REDACTED] LOS [REDACTED]

History (not listed above):

6-15-05/ [REDACTED] PHA/ [REDACTED] / Unfounded

7-31-13/ [REDACTED] (Case ID [REDACTED] OOSC

County: [REDACTED]

Notification: None

School/ Daycare: None

Native American Descent: No

Directions to the house: None

Reporter / Relationship [REDACTED]

Reporter states that today [REDACTED] gave birth to her daughter ([REDACTED], 1 day old). [REDACTED] and her husband [REDACTED], age 26) live with her husband's great-grandfather ([REDACTED], age 65), along with their daughter ([REDACTED], age 1).

[REDACTED] did not tell the staff that she was prescribed medication. [REDACTED] tested positive for Benzodiazepines upon admission to the hospital. [REDACTED] also tested positive for Benzodiazepines. [REDACTED] reported that she went to the dentist (unknown) and got a prescription for Lortab for her teeth. She has not yet produced a prescription bottle for the Lortab. [REDACTED] also reported that she has taken Percocet that she got from [REDACTED] some people [REDACTED] (unknown). She reported taking Percocet when her teeth first started hurting. She did not state when she used or the last time she used drugs. It is suspected that [REDACTED] did not test positive for drugs during prenatal care.

On Friday (10-4-13), [REDACTED] did not show up for the first planned Cesarean section (C-section) for [REDACTED]. This morning [REDACTED] did not show up for the second planned C-section. The grandfather ([REDACTED]) reported that he could not get [REDACTED] up because she stayed up [REDACTED] partying [REDACTED] all night.

[REDACTED] was in respiratory distress at birth and she is still in respiratory distress. According to the nurses (unknown), the doctor (unknown) stated that if [REDACTED] did not come to the hospital today, [REDACTED] would have died.

[REDACTED] has been transported from [REDACTED] Hospital to the [REDACTED]. She is in the NICU. It's unknown if [REDACTED] is showing signs of drug withdrawal due to respiratory failure. It is unknown if [REDACTED] is prepared for [REDACTED] is pumping milk, but it is unknown how long (or if) [REDACTED] could safely use her breast milk. [REDACTED] has not had contact with [REDACTED]. When [REDACTED] gets discharged (within the next 4 days), she can visit [REDACTED] at the [REDACTED]. Currently, [REDACTED] and the grandparents can visit [REDACTED].

[REDACTED] was born full term. It's unknown if [REDACTED] will be able to care for [REDACTED] medically if [REDACTED] has been exposed to drugs. It's unknown if [REDACTED] has a history of prenatal abuse with [REDACTED] (age 1).

The Social Worker at [REDACTED] and can be reached at [REDACTED]

Extended Intake by [REDACTED] 253p on 10-8-13:

[REDACTED] is not doing very well; it is unknown if she will survive or pass away.

B. Family Story:

II. Assessment of Family Strengths and Needs/Risks:

A. Family Significant Strengths:

B. Family Significant Needs/Risks/Concerns:

III. Person Information:

A. Children:

11/07/2013 - [REDACTED] - FAST - [REDACTED] - Child has had limited contact with parents due to safety concerns at birth. Child has medical issues from complications during birth

11/07/2013 [REDACTED] - FAST - [REDACTED] - Childs father is not regularly involved, child struggles with behaviors and milestones.

09/23/2014 - [REDACTED] - FFA - Family - [REDACTED] are up to date on all their appointments. They both received TEIS. [REDACTED] is growing and seems on target developmentally. She can crawl, pull up and walks with help from a toy or the foster parents. [REDACTED] is a little delayed for her age and has been referred for speech. [REDACTED] has been biting [REDACTED] for attention, and due to er behavior she has also been referred to a behavior specialist at [REDACTED] Peds.

B. Adults:

11/07/2013 - [REDACTED] - FAST - [REDACTED] admits to not continuing mental health treatment, he reported self medicating with unprescribed drugs and using these with [REDACTED]

11/07/2013 - [REDACTED] - FAST - [REDACTED] reported he has not been involved in the childs life consistantly. e reported that he was not working and has financial issues. [REDACTED] reported being in a treatment rehab program for drug use.

11/07/2013 [REDACTED] - FAST - [REDACTED] admits to using unprescribed drugs with her husband. She admits to having the child with others and in her care.

05/12/2014 - ██████████ - FFA - Family - On April 3, 2014, the last court hearing, it was ordered that Mother, ██████████ would pass two drug screens and complete an Intensive Outpatient Program at ██████████ before receiving visitation with the children, ██████████. FSW ██████████ told ██████████ after court FSW ██████████ would help her make contact with ██████████ to get treatment started. FSW ██████████ asked ██████████ to come by the DCS Office day or the following day. ██████████ never showed up either day to make contact with IOP. FSW ██████████ has also attempted to make contact with ██████████ requesting a drug screen. FSW ██████████ phone contact on April 17, 2014 and April 29, 2014. ██████████ does not have a voice mail set up. FSW ██████████ sent test message on April 17, 2014 and April 23, 2014 asking for her to come to the office for a drug screen explaining what time she could come to the office. There was no concern that her phone wasn't working as ██████████ sent FSW ██████████ a text message saying Happy Easter on April 21, 2014. FSW ██████████ has no heard from ██████████ since the last court hearing. On April 02, 2014 ██████████ father came to the office to see FSW ██████████. He stated he wanted to work the permanency plan and wanted his family together. He also stated he was unable to pass a drug screen on this date because he has smoked pot recently. FSW ██████████ explained to ██████████ that he had to pass two drug screens before receiving visitation, this is court ordered. ██████████ understood this. ██████████ attended court on April 03, 2014. After Court FSW ██████████ explained to both ██████████ and ██████████ that if they plan to be a couple then they would both have to work the permanency plan. This was understood by both parents. FSW ██████████ requested a drug screen by text on April 17, 2014 and April 23, 2014 when requesting a drug screen from ██████████. ██████████'s Father ██████████ continues to at the ██████████ County Detention Center. He reports he is unsure of when he gets out but states he wishes to get custody of ██████████. The Department made several attempts to obtain a drug screen before ██████████ was arrested.

Also on 04/03/2014 the, maternal grandparents ██████████ filed for custody of ██████████ and ██████████. Before removal of ██████████ and ██████████ the maternal grandparents had ██████████ in their care but didn't have custody. They took her to ██████████ without approval by a parent. The mother ██████████ filed a police report and the grandparents were extradited back to TN for custodial interference. The grandparents denied the allegations and the charges were dismissed in April 2014. The grandparents presented to the Department from the beginning that they would like to be a placement option for the children but were not looked at due to the pending charges, the mother alleging the grandfather was abusive, and a CPS report from ██████████ about the condition of the child at the time the grandparents were arrested.

█████████'s CPS noted that ██████████ was in a pack and play on top of a twin size bed and they could not reach in as was too high and could have tip off the bed. ██████████ also noted that the ██████████ smelled, her feet and legs were dirty and she cried a lot. ██████████ the mother, stated that her father was very mean and had broken the grandmother's phone and refused to return to TN with the child. The grandparents had filed for benefits in ██████████ and had lied about who was in the home and that ██████████ (their youngest child) was the ██████████'s mother. The grandparents were charged with Custodial interference and extradited back to TN. These charges were dismissed April 1, 2014 and did get it expunged.

The grandparents are on a fixed income of \$1650 per month disability and pay rent of \$600.00 per month. Concerns that this income would not support another two people in the home. Mr. ██████████ is prescri

09/23/2014 - ██████████ N - FFA - ██████████ has been incarcerated for 9 months of the 11 months that ██████████ has been in custody. ██████████ reports he will be released on 09/28/2014 and wishes to work a plan to get ██████████ in his home. ██████████ stats he is in jail because of a VOP of an aggravated assault, he chose to flatten his time and remained in jail, once released he will not be on probation. He states once he get out of jail he will reside with his mother in ██████████ but will obtain housing for him and ██████████. He gets \$700.00 a month, SSI and Social Security. He has a driver ██████████ license but no transportation. ██████████ has not seen ██████████ in over a year. ██████████ will have two pass two drug screens before receiving visitation with ██████████.

C. Family Together History:

11/07/2013 - ██████████ - FAST - ██████████ struggle with parenting thier children, ██████████ and ██████████ are residing with family and the condition of this residence is in disrepair, there are possible environmental issues. ██████████ is residing with his mother and reported he as financial issues with getting his own residence.

11/07/2013 - ██████████ - FAST - ██████████ - Mother and father are not that involved with childs care and have had limited contact with either child due to safety concerns

D. Other Significant Relationships:

E. Legal/Court/DCS History:

Intake ID	Decision Date / Time	Intake Type	Investigation ID/ Assessment ID
[REDACTED]		CPS	[REDACTED]
[REDACTED]		CPS	[REDACTED]
[REDACTED]	07/31/2013 12:17 PM	Out of State Courtesy Request	
[REDACTED]		All Other Intakes	

Action Date	Action Category	Action Type	Court Docket #	Action Concerning	Additional Info
	Hearing	Special		[REDACTED]	
	Hearing	Special		[REDACTED]	
10/11/2013	Court Order	Custody Removal (Initial)		[REDACTED]	
07/29/2014	Court Order	Annual Permanency Review		[REDACTED]	
	Hearing	Annual Permanency Hearing		[REDACTED]	
	Hearing	Foster Care Review Board		[REDACTED]	
	Hearing	Special		[REDACTED]	
	Hearing	Foster Care Review Board		[REDACTED]	
	Hearing	Foster Care Review Board		[REDACTED]	
	Hearing	Adjudicatory		[REDACTED]	
	Hearing	Special		[REDACTED]	
10/11/2013	Court Order	Custody Removal (Initial)		[REDACTED]	
07/29/2014	Court Order	Annual Permanency Review		[REDACTED]	
	Hearing	Annual Permanency Hearing		[REDACTED]	
	Hearing	Foster Care Review Board		[REDACTED]	

Hearing	Special	[REDACTED]
Hearing	Foster Care Review Board	[REDACTED]
Hearing	Foster Care Review Board	[REDACTED]
Hearing	Adjudicatory	[REDACTED]

IV. Assessment of Safety:

11/07/2013 - Safety - [REDACTED] refused a urine drug screen, he admitted to taking unprescribed medication. [REDACTED] admitted to using unprescribed medications, while she was preganant and as recent as 10/05/13. [REDACTED] is currently a patiant at [REDACTED] and unable to care for either child. Any visitation with either child will be supervised. [REDACTED] missed 3 scheduled C-Section appointments and the child [REDACTED] was born in distress. CM [REDACTED] was unable to view the residence located at [REDACTED], Cm was not allowed to enter the home to view the enviromental conditions of the residence. [REDACTED] displayed behaviors consistant with that of possible drug issues or mental health issues, he refused a urine drug screen. He reported that he had not been seeing mental health counselor even though it had been recommended.

V. Assessment of Well Being:

05/12/2014 - [REDACTED] FFA - Family - [REDACTED] will successfully complete an Intensive Outpatient Program and exhibit the ability to be drug free. [REDACTED] will comply with random drug screens including hair follicle, nail bed, mouth swab, or urine screens. [REDACTED] will attend individual therapy and intensive parenting education through therapeutic visitation. [REDACTED] permanency plan requires him to comply with random drug screens and be drug free. He will have a mental health intake and alcohol and drug assessment. [REDACTED] will comply with all treatment recommendations and exhibit the ability to be drug free. [REDACTED] will comply with psychiatric treatment to address mental health diagnosis and medication management. [REDACTED] permanency plan requires him to complete an alcohol and drug assessment. He will be open and honest during the assessment and comply with treatment recommendations. [REDACTED] will have two clean drug screens prior to visitation beginning.

09/23/2014 - [REDACTED] - FFA - Family - [REDACTED] are up to date on all their appointments. They both received TEIS. [REDACTED] is growing and seems on target developmentally. She can crawl, pull up and walks with help from a toy or the foster parents. [REDACTED] is a little delayed for her age and has been referred for speech. [REDACTED] has been biting [REDACTED] for attention, and due to er behavior she has also been referred to a behavior specialist at [REDACTED] Peds.

VI. Assessment of Permanence:

05/12/2014 - [REDACTED] FFA - Family - The permanency plan also states that the [REDACTED] will successfully complete an Intensive Outpatient Program and exhibit the ability to be drug free. [REDACTED] will comply with random drug screens including hair follicle, nail bed, mouth swab, or urine screens. [REDACTED] will also maintain her income and transportation. She will pay \$10.00 a month for child support. [REDACTED] will attend individual therapy and intensive parenting education through therapeutic visitation. [REDACTED] will exhibit appropriate and consistent parenting.

[REDACTED] □ permanency plan requires him to obtain and maintain housing, legal source of income, and a legal source of transportation. He will comply with random drug screens and be drug free. [REDACTED] will pay child support in the amount of \$10.00 per month as ordered by the court. [REDACTED] will not reside with [REDACTED] engaging and complying with the permanency plan. He will have a mental health intake and alcohol and drug assessment. [REDACTED] will comply with all treatment recommendations and exhibit the ability to be drug free. [REDACTED] will comply with psychiatric treatment to address mental health diagnosis and medication management.

[REDACTED] □ permanency plan requires him to complete an alcohol and drug assessment. He will will be open and honest during the assessment and comply with treatment recommendations. [REDACTED] will have two clean drug screens prior to visitation beginning. Once he starts visitation he will receive therapeutic visitation to address bonding and age appropriate parenting with the father during visitation. [REDACTED] will obtain a safe and stable home with adequate space for [REDACTED]. He will also obtain and maintain a legal source of employment and exhibit the ability to support his child, \$10.00 a month as ordered by the court. [REDACTED] will comply with random drug screens and exhibit the ability to remain drug free.

VII. Assessment of Resources:

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
[REDACTED]	Support Services/ Respite care	Approved	[REDACTED]	10/08/2013	10/10/2013
Unknown Participant [REDACTED] Unknown	Support Services/ Assessments	Approved	[REDACTED]	02/12/2015	
[REDACTED]	Support Services/ Sitter Services	Authorizatio n Pending	[REDACTED]	10/14/2013	
[REDACTED]	Support Services/ Sitter Services	Authorizatio n Pending	[REDACTED]	01/28/2014	
[REDACTED]	Support Services/ Sitter Services	Denied	*To be determined by Regional Fiscal Unit	10/11/2013	
[REDACTED]	Behavioral Services/ Non tenn care eligible A&D	Approved	[REDACTED]	10/10/2014	10/31/2014
[REDACTED]	Behavioral Services/ Non tenn care eligible A&D	Approved	[REDACTED]	11/05/2014	11/30/2014
[REDACTED]	Behavioral Services/ Non tenn care eligible A&D	Approved	[REDACTED]	12/01/2014	12/31/2014
[REDACTED]	Behavioral Services/ Non tenn care eligible A&D	Approved	[REDACTED]	10/10/2014	10/31/2014
[REDACTED]	Behavioral Services/ Non tenn care eligible A&D	Approved	[REDACTED]	06/01/2014	06/30/2014
[REDACTED]	Behavioral Services/ Non tenn care eligible A&D	Approved	[REDACTED]	01/14/2014	01/31/2014

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Denied	[REDACTED]	12/10/2013	
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	11/01/2013	11/21/2013
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	11/05/2013	12/11/2013
[REDACTED]	Support Services/ Family Support Services	Denied	*To be determined by Regional Fiscal Unit	11/04/2013	
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	10/23/2013	12/11/2013
[REDACTED]	Support Services/ Parenting	Approved	[REDACTED]	02/06/2015	03/23/2015
[REDACTED]	Support Services/ Parenting	Approved	[REDACTED]	12/15/2013	01/30/2014
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	12/08/2014	12/31/2014
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	02/09/2015	02/28/2015
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	01/02/2015	01/31/2015
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	02/01/2014	02/28/2014
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	03/01/2014	03/31/2014
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	12/02/2013	12/31/2013
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	01/01/2014	01/31/2014

Worker's Signature

Date

Supervisor's Signature

Date



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker [REDACTED]

Date of Referral: 10/8/13 1:23 PM

Date of Assessment: 10/8/13 12:00 AM

Assessment Type: Initial

Number of Children in the Household: 2

Section 1: Immediate Harm Factors

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

Yes No

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



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

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

Section 2: Safety Interventions

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

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): Child placed in respite home, IPA signed by Mother

Protective Custody Interventions:

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



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Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

Case Manager: _____

Date: _____

Team Leader: _____

Date: _____