



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 02/01/2013 09:03 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 02/01/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 02/04/2013 08:12 AM
First Team Leader Assigned: [REDACTED] Date/Time 02/04/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 02/04/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	0 Yrs	Neglect Death	Yes	[REDACTED]	Other Relative

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
Referent Address: [REDACTED]
Referent Phone Number: [REDACTED]
Type of Contact: I-3 Phone
Notification: Letter
Narrative: TFACTS:

Prior INV/ASMT of Abuse: Yes 1
Prior INV/ASMT of Neglect: no
Screen Outs: No

Indicated: [REDACTED]/ABN/11/30/2006/[REDACTED]

County: [REDACTED]
Notification: Letter
School/ Daycare: none
Native American Descent: none
Directions:

Reporters name/relationship: [REDACTED]

Reporter states:



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: Race: White Age: 0 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:

Name: [REDACTED]
Gender: Female Date of Birth: [REDACTED] Participant ID: [REDACTED]
SSN: Race: 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:



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: 02/01/2013

Assignment Date: 02/04/2013

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
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Indicated / Perpetrator Indicated	Yes	[REDACTED] 06/04/2013
2	[REDACTED]	[REDACTED]	Drug Exposed Child	[REDACTED]	[REDACTED]	Allegation Indicated / Perpetrator Unknown	No	[REDACTED] 06/04/2013
3	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED] 06/04/2013
4	[REDACTED]	[REDACTED]	Abuse Death	[REDACTED]	[REDACTED]	Allegation Unfounded / Perpetrator Unfounded	No	[REDACTED] 06/04/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: AIPi for DEI and DEC, AUPU for Neglect Death

D. Case Workers

Case Worker: [REDACTED]

Date: 06/04/2013

Team Leader: [REDACTED]

Date: 06/08/2013

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.

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] met with [REDACTED] at his great grandmother's house on 02-02-2013. [REDACTED] was appropriately dressed and appeared to be healthy. [REDACTED] did not speak to CM. CM tried multiple times to engage in a conversation with [REDACTED] but he refused to talk.

CM [REDACTED] observed [REDACTED] in NICU after he was pronounced dead.



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

Case Name : ██████████

Investigation ID: ██████████

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

CM ██████ received the Autopsy records that stated the cause of death as aspiration of meconium. The records also indicated the extensive drug use of the mother while she was pregnant. CM obtained the medical records from ██████ Hospital that included drug test before giving birth. ██████ was positive for Opiates, THC and Benzodiazepines. The child was positive for Opiates at birth.

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

Ms. ██████ stated that Mr. ██████ is ██████ father. She stated that Mr. ██████ does not know that she was using drugs during her pregnancy. She stated that she was trying to come off of Roxicodone during her pregnancy. She stated that she was seeing a doctor in ██████ that was trying to help her into either ██████ or some other drug treatment center, but that every time she checked with him, they had not gotten her into ██████. She stated that they had a different excuse every time she contacted them. Ms. ██████ stated that she could not remember the name of the doctor, but that it was at ██████ Medical Center, which is across the street from ██████ Hospital. She stated that she thinks the doctors name was Dr. ██████. She stated that she went there because a family member suggested that doctor. She stated that he helped a family member come off of Roxicodone when she was pregnant. Ms. ██████ stated that she went to that doctor 3-4 times, but that the last time she went there was around Thanksgiving.

Ms. ██████ stated that she was smoking THC because of the morning sickness. She stated that was the only way she would have an appetite.

Ms. ██████ stated that before she was pregnant, she snorted the Roxicodone so it would get into her system quicker. She stated that once she found out she was pregnant, she started taking them orally. She stated that she continued taking the medication because she did not want to withdraw while she was pregnant. She stated that she also took it because her teeth hurt so badly. Ms. ██████ stated that she started taking Roxicodone because her teeth hurt. She stated that was when she was 21. She stated that these were not prescription medication because she did not have insurance. Ms. ██████ stated that during her pregnancy, she used two Roxicodone a day, one in the morning and one at night. She stated that they were 30 mg. pills. Ms. ██████ denied ever taking the drug intravenously. Ms. ██████ stated that she only took the Xanax maybe twice during her pregnancy. She stated that she last took that the other day. She stated that she also took the Xanax because her teeth hurt. Ms. ██████ stated that she bought her Roxicodone from a friend named ██████ who lived in ██████.

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

This case came to the attention of the Department with allegation of DEI, DEC and Neglect Death. In the body of the referral it was alleging that the mother ██████ gave birth to ██████ at ██████ Regional on ██████. ██████ was positive for Opiates at birth and ██████ was positive for Opiates, Benzodiazepine and THC. ██████ was transported to ██████ at 430 PM EST and was placed in NICU. ██████ was pronounced dead at 8:50 PM ██████. The initial cause of death was reported as aspiration of meconium.

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

Upon further investigation it was determined that the facts supported the allegation of DEC and DEI. ██████ admitted to taking Roxicodone and Xanax throughout her pregnancy as well as smoking THC for appetite. ██████ reported that she was snorting Roxicodone before she found out she was pregnant. She started taking the pills orally after she found out she was pregnant but was not able to stop it as she was advised that the baby might have withdrawals before it was born. ██████ reported that she had been seeking for drug treatment programs for pregnant women but was not able to find any. ██████ reported that she had seen an OBG at ██████ woman's care in ██████ TN multiple times. The OBGYN was supposed to help her target her drug addiction and sign up for rehab while she was pregnant, but they did not help her. CM requested medical



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]

records from [REDACTED] OBG that showed that [REDACTED] had only seen an OBGYN at [REDACTED] once while she was pregnant. [REDACTED] had limited prenatal care (almost none) throughout her pregnancy.

The Department completed an Expedited Home Study on [REDACTED] and placed [REDACTED] 5 year old son [REDACTED] with her. There was a preliminary hearing at [REDACTED] JC on 02-13-2013. Temporary custody of [REDACTED] was granted to his maternal great aunt [REDACTED]. [REDACTED] was ordered to do A and D assessment and follow the recommendation. To the best of CM [REDACTED] knowledge [REDACTED] had not done any A and D assessments or treatments yet.

This case is being closed as AIPI for DEI and DEC against [REDACTED]. The allegation of Neglect Death is unfounded based on the Autopsy record stating that the cause of death was aspiration of meconium.

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: 06/04/2013

Contact Method:

Contact Time: 06:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

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

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 05:34 PM Entered By: [REDACTED]

06-04-2013 @ 6:30 PM EST

Background check

Background checks have been ran on [REDACTED] and her family members for Expedited Home Study. See all the hard copies in section 2 of the hard file.

Case Summary

This case came to the attention of the Department with allegation of DEI, DEC and Neglect Death. In the body of the referral it was alleging that the mother [REDACTED] gave birth to [REDACTED] at [REDACTED] Regional on 02-01-2013. [REDACTED] was positive for Opiates at birth and [REDACTED] was positive for Opiates, Benzodiazepine and THC. [REDACTED] was transported to [REDACTED] at 430 PM EST and was placed in NICU. [REDACTED] was pronounced dead at 8:50 PM EST. The initial cause of death was reported as aspiration of meconium. Upon further investigation it was determined that the facts supported the allegation of DEC and DEI. [REDACTED] admitted to taking Roxicodone and Xanax throughout her pregnancy as well as smoking THC for appetite. [REDACTED] reported that she was snorting Roxicodone before she found out she was pregnant. She started taking the pills orally after she found out she was pregnant but was not able to stop it as she was advised that the baby might have withdrawals before it was born. [REDACTED] reported that she had been seeking for drug treatment programs for pregnant women but was not able to find any. [REDACTED] reported that she had seen an OBG at [REDACTED] woman's care in [REDACTED] TN multiple times. The OBGYN was supposed to help her target her drug addiction and sign up for rehab while she was pregnant, but they did not help her. CM requested medical records from [REDACTED] OBG that showed that [REDACTED] had only seen an OBGYN at [REDACTED] once while she was pregnant. [REDACTED] had limited prenatal care (almost none) throughout her pregnancy. The Department completed an Expedited Home Study on [REDACTED] and placed [REDACTED] 5 year old son [REDACTED] with her. There was a preliminary hearing at [REDACTED] JC on 02-13-2013. Temporary custody of [REDACTED] was granted to his maternal great aunt [REDACTED]. [REDACTED] was ordered to do A and D assessment and follow the recommendation. To the best of CM [REDACTED] knowledge [REDACTED] had not done any A and D assessments or treatments yet. This case is being closed as AIPI for DEI and DEC against [REDACTED]. The allegation of Neglect Death and Abuse Death are unfounded based on the Autopsy record stating that the cause of death was aspiration of meconium.



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Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [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: 06/04/2013

Contact Method: Phone Call

Contact Time: 04:55 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact, Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 04:17 PM Entered By: [REDACTED]

06-04-2013 @ 4:55 PM EST

CM [REDACTED] contacted [REDACTED] to touch base with her and check on [REDACTED]. [REDACTED] reported that [REDACTED] had adjusted to her and her family. She reported that [REDACTED] was doing well at school and had a pretty good report card. [REDACTED] reported that [REDACTED] had a couple of absences due to being sick, but had not been tardy at all. [REDACTED] reported that [REDACTED] (GGM) and [REDACTED] (mother) visit [REDACTED] 3 times a week. He also had a couple o visits with his paternal grandmother. [REDACTED] reported that she was positive that [REDACTED] had not been to any rehab and had reported to GAL that she had an A and D assessment tomorrow at 1:30 OM. [REDACTED] said she did not think [REDACTED] was going to show up to the hearing tomorrow as she was still using drugs and was afraid of failing a drug test.



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: 06/03/2013

Contact Method: Face To Face

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): ACV Interview/Observation

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 06/04/2013 03:13 PM Entered By: [REDACTED]

test entry to determine if child can be entered as ACV. CHILD WAS NOT SEEN ON THIS DAY. Tfacts issue.



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: 05/15/2013

Contact Method: Face To Face

Contact Time: 10:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

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

Contact Type(s): CPIT (Child Protective Investigative Team)

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 05:26 PM Entered By: [REDACTED]

05-15-2013 @ 10:30 PM EST

This case was presented to CPIT on 05-15-2013. The team decided to indicate [REDACTED] for of DEI and unfound for Neglect Death and Abuse Death allegations. See CPIT documents in section 4 of the hard file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/14/2013

Contact Method:

Contact Time: 02:40 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/14/2013

Completed date: 05/14/2013

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: 05/14/2013 01:52 PM Entered By: [REDACTED]

Case has been reviewed periodically with CM, TL and TC. The case is going to CPIT on 5/15/2013, as the autopsy has been received. DCS Legal, [REDACTED] has been consulted regarding this case going to CPIT. All investigative tasks have been completed. Services for mother to attend A&D assessment were attempted, but mother did not respond to CM's attempt to contact her. Sibling who is placed with a relative is adjusting without concern at this time. He is placed with a family member and has maintained relationships that he had prior to changing homes. No reported issues in school or health.

Action Steps:

Present to CPIT

Consult with Legal

Severe Abuse hearing is set 6/5/13 in [REDACTED] County Juvenile 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: 04/30/2013

Contact Method: Correspondence

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact,Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 05:29 PM Entered By: [REDACTED]

04-30-2013 @ 9:00 AM EST

CM [REDACTED] received the Autopsy records that stated the cause of death as aspiration of meconium.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/15/2013

Contact Method: Face To Face

Contact Time: 02:10 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,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: 06/04/2013 03:17 PM Entered By: [REDACTED]

05-15-2013 @ 2:15 PM EST

CM [REDACTED] visited [REDACTED] at [REDACTED] Elementary school. [REDACTED] was appropriately dressed and appeared to be healthy. [REDACTED] did not talk to CM. He was just shaking his head. CM asked if everything was ok and he nodded his head as "yes". CM asked if [REDACTED] was still with his aunt [REDACTED] and he nodded as "yes" again.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/25/2013 Contact Method: Attempted Phone Call
 Contact Time: 12:20 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 04/15/2013
 Completed date: 04/15/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/15/2013 03:06 PM Entered By: [REDACTED]
 02-25-2013 @ 12:20 PM CST

CM [REDACTED] contacted [REDACTED] at her grandmother's number. CM was advised that [REDACTED] was not there but she would pass a message on to her for a call back. CM was given a phone number to contact [REDACTED] at her boyfriends house. CM attempted to contact [REDACTED] but was not able to reach her. CM left a message for a call back.

Narrative Type: Addendum 1 Entry Date/Time: 04/15/2013 03:07 PM Entered By: [REDACTED]

[REDACTED] phone numbers [REDACTED] (grandmother), [REDACTED] (boyfriend)



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/13/2013

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Court

Created Date: 04/15/2013

Completed date: 04/15/2013

Completed By: [REDACTED]

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

Contact Type(s): Court Hearing

Contact Sub Type:

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

Narrative Type: Original

Entry Date/Time: 04/15/2013 11:01 AM

Entered By: [REDACTED]

02-13-2013

Court Hearing

Present were:

Judge: [REDACTED]

DCS Atty: [REDACTED]

DCS CM: [REDACTED]

Mom's Atty: [REDACTED]

Mom: [REDACTED]

GGM: [REDACTED]

GGA: [REDACTED]

The mother waived and reserved her right to the hearing. [REDACTED] reported that [REDACTED] father was in jail for violation of probation, possession, and reckless endangerment. He used to reside in [REDACTED] in [REDACTED] TN with his parents [REDACTED] and [REDACTED].

All the parties agreed to ask the Court to grant [REDACTED] petition for custody. The Court granted temporary custody to [REDACTED]. The mother [REDACTED] was ordered to have supervised visits with [REDACTED] only. [REDACTED] had discretion not to allow visitation with [REDACTED] if [REDACTED] appeared to be intoxicated. The Court ordered "no visitations" with the biological father until he was able to appear in Court in person. The mother was subject to random drug tests by DCS and GAL. The mother was ordered to take A and D Assessment and follow recommendations. The mother was ordered to comply with DCS and GAL as well as sign any release documents for both to get records of A and D. Next hearing was set for June the 5th of 2012 @ 1:30 PM.



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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: 02/04/2013

Contact Method: Attempted Phone Call

Contact Time: 09:43 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/02/2013

Completed date: 04/02/2013

Completed By: [REDACTED]

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

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

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

Narrative Type: Original

Entry Date/Time: 04/02/2013 09:35 AM

Entered By: [REDACTED]

02-04-2013 @ 9:43 AM EST

CM [REDACTED] received a message from [REDACTED] stating that she was ready to be discharged that day and was getting ready to leave the 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: 02/02/2013

Contact Method: Face To Face

Contact Time: 09:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 04/01/2013

Completed date: 04/01/2013

Completed By: [REDACTED]

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

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/01/2013 03:39 PM Entered By: [REDACTED]

02-02-2013 @ 9:30 PM EST

CM [REDACTED] met with [REDACTED] at [REDACTED] Regional Hospital. [REDACTED] reported that she was doing better but still had pain. CM [REDACTED] explained to [REDACTED] what IPA was and the chain of event that were going to follow the IPA. [REDACTED] reported that she wanted her aunt [REDACTED] to gain custody of [REDACTED] and take care of him while she was seeking treatment for her addiction. [REDACTED] signed the IPA and thanked CM. CM left her contact information with [REDACTED] and asked her to notify CM when she was being discharged.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/02/2013 Contact Method: Face To Face
 Contact Time: 07:30 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 04/01/2013
 Completed date: 04/01/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact,Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/01/2013 03:26 PM Entered By: [REDACTED]
 02-02-2013 @ 7:30 PM EST

Home Visit with [REDACTED]

CM [REDACTED] visited [REDACTED] at her primary residence as he was identified as family member to take care of [REDACTED]
 Present were:

[REDACTED] DOB [REDACTED], SS# [REDACTED]
 [REDACTED] DOB [REDACTED], SS# [REDACTED]
 [REDACTED] DOB [REDACTED], SS# [REDACTED]
 [REDACTED] -DOB [REDACTED], SS# [REDACTED]

CM [REDACTED] discussed the situation in regards to taking care of [REDACTED] and signing an IPA. CM explained to the family what IPA was and how it worked. CM also obtained verbal agreement of [REDACTED] before she discussed it with the family members. CM [REDACTED] spoke to TL [REDACTED] who performed background checks for all the adults of the family. All the background checks came back as clean except for [REDACTED] who had child support warrants pending. CM [REDACTED] also administered a drug test for all the adults of the family. All family members were positive for BUP but CM was not sure that the tests were credible as none of the family members had been using any BUP or any other drugs. CM consulted with TC [REDACTED] and DCS Legal [REDACTED] and obtained permission to sign the IPA that night. CM also scheduled a drug test in DCS office the upcoming Monday 02-04-2013 for all the adults in the family. IPA was signed on 02-02-2013. CM [REDACTED] also spoke to the family about the long term care options. CM was advised that the family would take care of [REDACTED] as long as needed. The house was observed to be free of visible hazards, had 3 bedrooms, a living room a kitchen and 2 bathrooms. There was plenty of food in the house and the child sleeping area was appropriate.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/02/2013

Contact Method: Face To Face

Contact Time: 05:10 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 06/04/2013

Completed date: 06/04/2013

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,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: 06/04/2013 02:56 PM Entered By: [REDACTED]

02-02-2013 @ 5:10 PM EST

Interview/Observation with [REDACTED]

CM [REDACTED] visited [REDACTED] at his maternal grandparents' house ([REDACTED] (maternal great grandmother) and [REDACTED] (maternal grandfather)). [REDACTED] was not home as he was spending time with his maternal grandmother. CM advised [REDACTED] that she needed to see the child and [REDACTED] called her daughter to bring [REDACTED] back immediately. CM [REDACTED] introduced herself and advised of the reason she was visiting the family.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/02/2013 Contact Method: Face To Face
 Contact Time: 04:50 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 04/01/2013
 Completed date: 04/01/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Other Persons Living in Home Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/01/2013 03:04 PM Entered By: [REDACTED]
 02-02-2013 @ 4:50 PM EST

CM [REDACTED] visited [REDACTED] at his maternal grandparents' house [REDACTED] (maternal great grandmother) and [REDACTED] (maternal grandfather). [REDACTED] was not home as he was spending time with his maternal grandmother. CM advised [REDACTED] that she needed to see the child and [REDACTED] called her daughter to bring [REDACTED] back immediately. CM [REDACTED] introduced herself and advised of the reason she was visiting the family.

Interview with [REDACTED]

[REDACTED] reported her DOB as [REDACTED], her SS# [REDACTED] and her phone number [REDACTED]. [REDACTED] reported that she was unemployed and was receiving disability. [REDACTED] reported that she was aware of what had happened the night before at the hospital and that her great granddaughter had drug addiction. [REDACTED] reported that [REDACTED] had bad teeth full of infection. She was trying to find a doctor to help her with it as she did not have insurance. [REDACTED] was advised that it was as a result of staff infection that was untreated. [REDACTED] started taking pain medication for her tooth aches and became addicted. [REDACTED] had been taking [REDACTED] and last time was observed taking it a year ago. [REDACTED] was height risk when she was pregnant with [REDACTED]. [REDACTED] reported that she thought [REDACTED] was going to her prenatal appointments and that one of the doctor's in [REDACTED] was supposed to be helping her to get rid of her addiction and detox while she was pregnant. She was also seen by doctors at [REDACTED] hospital and that [REDACTED] hospital refused to treat her as he had also gone to see a doctor in [REDACTED]. [REDACTED] reported that she had a feeling that [REDACTED] was using drugs while she was pregnant, but she had not seen her take medication. [REDACTED] reported that [REDACTED] mother used to be a drug addict and that her sister had recently lost the custody of her children due to drugs.

[REDACTED] reported that she had several medical conditions including a back surgery that she had to take pain medication for. [REDACTED] provided CM with the following medication bottles:

Oxycontin 80 mg - 120 QTY filled on 01-03-2013 4 left (one month supply)

Oxycodone 30 mg - 180 QTY filled 01-03-2013 0 left (one month supply)

[REDACTED] reported that she had to take those medications to be able to fight the pain in her back and knees as she was not able to have her second surgery at the time.

Interview with [REDACTED] (maternal grandfather)



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Mr. [REDACTED] reported his DOB as [REDACTED] his SS# [REDACTED] and his phone number as [REDACTED]. Mr. [REDACTED] reported that he was officially unemployed but was doing odd jobs for family and friends. Mr. [REDACTED] also reported that he was aware of [REDACTED] drug addiction but had never seen her take medication. Mr. [REDACTED] reported that he would fail a drug test as he had taken a Xanax a day ago due to back pain. Mr. [REDACTED] reported that he was not a drug addict but sometimes he would take an pain medication to ease his back pain. Mr. [REDACTED] reported that he did not have insurance and was not able to go and see a doctor. Mr. [REDACTED] reported that his ex-wife, [REDACTED] mother was a drug addict and he had to go and forcefully get his daughters away from her when she was using drugs. Mr. [REDACTED] reported that he would leave the house and stay somewhere else just for [REDACTED] to be able to remain in his grandparents' house.

Interview with [REDACTED]

CM [REDACTED] observed [REDACTED] to be healthy and appropriately dressed. [REDACTED] refused to talk to CM [REDACTED] and called her a stranger. CM was not able to interview [REDACTED] although she made several attempts.

CM [REDACTED] contacted TC [REDACTED] and explained to her the situation. It was decided that the grandparents also were addicted to prescription medication and CM was advised to look into other relatives as temporary placement option. The family was able to identify [REDACTED] (maternal great aunt) as temporary placement for [REDACTED]. CM [REDACTED] spoke to [REDACTED] who also was in agreement with placing [REDACTED] with his great aunt. CM [REDACTED] went to [REDACTED] house to see the house and talk to all the household members.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/01/2013 Contact Method: Face To Face
 Contact Time: 11:25 AM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 02/25/2013
 Completed date: 02/25/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/25/2013 12:03 PM Entered By: [REDACTED]

2/1/13 11:25 a.m. [REDACTED] Childrens Hospital
 CMs [REDACTED] and [REDACTED] along with [REDACTED] PD Investigator [REDACTED] spoke to Dr. [REDACTED] [REDACTED] regarding child, [REDACTED]
 [REDACTED] social worker, [REDACTED] was also present. The following was reported:
 [REDACTED] was born 2/1/13 at 12:07 p.m. at [REDACTED] Hospital. Dr. [REDACTED] delivered [REDACTED] [REDACTED] was born by
 caesarean section due to Ms. [REDACTED] having a previous birth that way. Upon [REDACTED] birth, he had a low heart rate and was not
 breathing. [REDACTED] aspirated during birth and ingested meconium. Medical staff at [REDACTED] was able to bring [REDACTED] heart rate
 up and put him on a ventilator. [REDACTED] was brought to [REDACTED] at approximately 4:00 p.m. on this date. At that time, [REDACTED] was non
 responsive and floppy. [REDACTED] was put on a ventilator with 100 percent oxygen at that time. The mother, [REDACTED] was
 positive for THC, Benzodiazepines, and oxycodone. Ms. [REDACTED] has another child who is approximately 6 years old. Ms.
 [REDACTED] reported that this child was with the grandparents. Hospital staff did not have any information regarding this child.
 [REDACTED] heart rate dropped between 4:00 p.m. and 4:30 p.m. The parents were contacted at 6:00 p.m. because [REDACTED] had not
 made any improvements. [REDACTED] died at 8:58 p.m. at [REDACTED] on 2/1/13. Both parents were present. It was reported that both
 parents were appropriate while at [REDACTED] There were no initial toxicology screens done on [REDACTED] at [REDACTED]
 [REDACTED] was observed at 12:10 a.m. on 2/2/13 by CMs [REDACTED] and [REDACTED] and [REDACTED] and [REDACTED] PD Investigator [REDACTED]
 The number to NICU 1 was reported to be [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: 02/01/2013

Contact Method:

Contact Time: 03:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 04/01/2013

Completed date: 04/01/2013

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: 04/01/2013 02:31 PM Entered By: [REDACTED]

02-01-2013 @3:00 AM EST

CM [REDACTED] contacted TC [REDACTED] and gave her all the information collected throughout her investigation that night. CM was advised to follow up with the maternal grandmother the next day to check on [REDACTED] and his living conditions.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: System Completed
 Contact Date: 02/01/2013 Contact Method: Face To Face
 Contact Time: 01:40 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 02/25/2013
 Completed date: 03/04/2013 Completed By: System Completed
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/25/2013 12:05 PM Entered By: [REDACTED]

2/2/13 1:40 a.m. [REDACTED] [REDACTED]
 CMs [REDACTED] and [REDACTED] and PD Investigator [REDACTED] spoke to Mr. [REDACTED] at this time. There was no one else present. Mr. [REDACTED] stated that he has two other children. He stated that his oldest son is [REDACTED] (DOB [REDACTED]). He stated that [REDACTED] lives with his [REDACTED] mother, [REDACTED] (approximately 23 years old), in [REDACTED]. He stated that he signed his rights to [REDACTED] over so Ms. [REDACTED] husband could adopt [REDACTED]. Mr. [REDACTED] stated that his other son is [REDACTED] (DOB [REDACTED]). He stated that [REDACTED] will reside with his [REDACTED] mother, [REDACTED] (DOB [REDACTED]) in [REDACTED]. He stated that he is not on the birth certificate because Ms. [REDACTED] is still married; however, she has told him that he can see [REDACTED] whenever he wants. He stated that he works at [REDACTED]. He stated that they distribute liquor. He stated that the address [REDACTED]. Mr. [REDACTED] stated that Ms. [REDACTED] became pregnant around May. He stated that she told him about it the day she took the pregnancy test, which was around August or September. He stated that she was 10 or 11 weeks pregnant when they found out. He stated that Ms. [REDACTED] went to [REDACTED] Medical Center then. He stated that he thinks that she missed an appointment multiple times, so they kicked her out of the practice. He stated that then they went to an office in [REDACTED] County. He stated that he only went to one appointment, which was the one where they found out the sex of the baby. He stated that at that appointment, they said that he had a strong heart beat and that he was fine. He stated that Ms. [REDACTED] was doing well at that time. He stated that he did not go to any other appointments. Mr. [REDACTED] stated that yesterday was the first day they went to [REDACTED]. He stated that Ms. [REDACTED] had some kind of appointment, but he was not aware of what kind. He stated that he was not sure which office they were supposed to go to. He stated that Friday morning, Ms. [REDACTED] called him and said that she thought she had to go to the bathroom, and when she did, she started bleeding. He stated that he went to Ms. [REDACTED] home and brought her to the hospital around 7:00 a.m. Mr. [REDACTED] stated that he does not know of any other doctor or OB that Ms. [REDACTED] went to. He stated that Ms. [REDACTED] has never expressed any concerns to him about her pregnancy. He stated that he lives with his mother, so she does not see Ms. [REDACTED] a lot now. Mr. [REDACTED] stated that Ms. [REDACTED] moved back in with her grandmother when school started back so [REDACTED] could attend [REDACTED]. Mr. [REDACTED] stated that he just met Ms. [REDACTED] about a month ago. He stated that he does not really know her, but as far as he knows, she is a good care taker for [REDACTED]. He stated that Mr. [REDACTED] does not really have a lot of involvement with [REDACTED] because he just kind of stays to himself when he is at the home. He stated that as far as he knows, Mr. [REDACTED] does not do a lot of the care taking for [REDACTED]. He stated that he does not have any worries about [REDACTED] being with Ms. [REDACTED]. Mr. [REDACTED] stated that he does not do any drugs. He stated that they do random drug screens on them at work. He



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Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

stated that they normally get one per month. He stated that he does not think that Ms. [REDACTED] has used drugs recently. He stated that she has told him in the past that she was addicted to pills, but that was before they were dating. He stated that they have been dating since November 2011. Mr. [REDACTED] stated that he had his doubts about Ms. [REDACTED] drug use for awhile because she was always tired and had bags under her eyes. He stated that was at the beginning of last year.

Mr. [REDACTED] stated that they have not filled out the birth certificate for [REDACTED] yet. Mr. [REDACTED] stated that he and [REDACTED] have a good relationship. He stated that they play video games together a lot.

Mr. [REDACTED] stated that they had planned on [REDACTED] staying with [REDACTED] until he could get an apartment for them.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/01/2013 Contact Method: Face To Face
 Contact Time: 12:40 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 02/25/2013
 Completed date: 02/25/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/25/2013 07:45 AM Entered By: [REDACTED]

Child: [REDACTED]
 Sibling: [REDACTED]
 Mother: [REDACTED]
 Father of [REDACTED]
 Father of [REDACTED]
 Address: [REDACTED] (mother)
 Phone: [REDACTED] (mother)
 [REDACTED] (maternal great grandmother [REDACTED])
 Address: [REDACTED]
 Phone: [REDACTED]

2/2/13 12:40 a.m. [REDACTED] [REDACTED] Hospital)

CMS [REDACTED] and [REDACTED] and PD Investigator [REDACTED] spoke to Ms. [REDACTED] at this time. There was no one else present. Ms. [REDACTED] reported that she has another child, [REDACTED] (DOB [REDACTED]), who is currently with her grandmother, [REDACTED]. Ms. [REDACTED] reported that she has custody of [REDACTED] but she does not always stay at the home, so Ms. [REDACTED] takes care of [REDACTED]. Ms. [REDACTED] stated that she lives with her boyfriend, [REDACTED] part of the time. Ms. [REDACTED] stated that [REDACTED] father is [REDACTED] who is currently in [REDACTED] County Jail. She stated that he is approximately 24 or 24 and that he is white. She stated that she does not have contact with him.

Ms. [REDACTED] stated that Mr. [REDACTED] is [REDACTED] father. She stated that Mr. [REDACTED] does not know that she was using drugs during her pregnancy. She stated that she was trying to come off of Roxicodone during her pregnancy. She stated that she was seeing a doctor in [REDACTED] that was trying to help her into either [REDACTED] or some other drug treatment center, but that every time she checked with him, they had not gotten her into [REDACTED]. She stated that they had a different excuse every time she contacted them. Ms. [REDACTED] stated that she could not remember the name of the doctor, but that it was at [REDACTED] Medical Center, which is across the street from [REDACTED] Hospital. She stated that she thinks the doctors name was Dr. [REDACTED]. She stated that she went there because a family member suggested that doctor. She stated that he helped a family member come off of Roxicodone when she was pregnant. Ms. [REDACTED] stated that she went to that doctor 3-4 times, but that the last time she went there was



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

around Thanksgiving.

Ms. [REDACTED] stated that she was smoking THC because of the morning sickness. She stated that was the only way she would have an appetite. Ms. [REDACTED] stated that she only smoked in the morning and that she did that 2-3 times per week. She stated that she took a Xanax the day before yesterday (Thursday). She stated that she is trying to come off of Roxicodone.

Ms. [REDACTED] stated that before she was pregnant, she snorted the Roxicodone so it would get into her system quicker. She stated that once she found out she was pregnant, she started taking them orally. She stated that she continued taking the medication because she did not want to withdraw while she was pregnant. She stated that she also took it because her teeth hurt so bad. Ms. [REDACTED] stated that she started taking Roxicodone because her teeth hurt. She stated that was when she was 21. She stated that these were not prescription medication because she did not have insurance. Ms. [REDACTED] stated that during her pregnancy, she used two Roxicodone a day, one in the morning and one at night. She stated that they were 30 mg. pills. Ms. [REDACTED] denied ever taking the drug intravenously. Ms. [REDACTED] stated that she only took the Xanax maybe twice during her pregnancy. She stated that she last took that the other day. She stated that she also took the Xanax because her teeth hurt. Ms. [REDACTED] stated that she bought her Roxicodone from a friend named [REDACTED] who lived in [REDACTED]. Ms. [REDACTED] stated that [REDACTED] lives on [REDACTED] but that she does not know which apartment exactly. She stated that [REDACTED] is in her late 20s or early 30s. Ms. [REDACTED] stated that she does not know [REDACTED] last name, but that she drives a blue Nissan (possibly a Maxima). She stated that [REDACTED] lives alone and she has never seen any children with [REDACTED].

Ms. [REDACTED] stated that she found out she was pregnant when she was almost 4 months pregnant. She stated that she had her last period in May, but that it was not unusual for her to have irregular periods. She stated that she took a home pregnancy test in either August or September because she was throwing up and getting dizzy. She stated that the test was positive, so she made an appointment at [REDACTED] Hospital. She stated that she thought she saw [REDACTED] but that she could not remember if that was the correct name. She stated that at that appointment, it was confirmed that she was pregnant. She stated that the doctor gave her information about detox. Ms. [REDACTED] stated that she went to Dr. [REDACTED] at [REDACTED] Health Systems (Dr. [REDACTED] office is at the [REDACTED] Health Systems on [REDACTED]). Ms. [REDACTED] stated that Dr. [REDACTED] told her that there was nothing he could do for her, so she went to Dr. [REDACTED]. Ms. [REDACTED] stated that she went a month and a half from her last appointment with Dr. [REDACTED] before she contacted [REDACTED]. She stated that [REDACTED] was in the process of getting her records and setting her up with a doctor, but she had [REDACTED] before that happened. She stated that [REDACTED] and Dr. [REDACTED] were her primary OBGYNs, and they were supposed to help her get through a detox program, but they did not.

Ms. [REDACTED] told her that the doctor at [REDACTED] told her that she needed to get into a detox program because of the potential harm her drug use could do to her baby. She stated that she tried to get into the Suboxin clinic, but was not able to. Ms. [REDACTED] stated that she tried to come off of the Roxicodone before she found out she was pregnant, but was unsuccessful. She stated that after she found out she was pregnant, she wanted to come off of the drugs because she knew that they were harmful for her baby. Ms. [REDACTED] stated that she knows that the drugs were bad for her baby and that she thinks that it could have had something to do with [REDACTED] death. Ms. [REDACTED] stated that she had a drug screen done at [REDACTED] and the doctor told her then that her drug use was not good for the baby and that it would be harmful. She stated that the doctor told her then that she needed to come off of the Roxicodone. Ms. [REDACTED] stated that she last took the Roxicodone 2-3 days ago and last smoked THC about two weeks ago. She stated that it could have been longer than two weeks.

Ms. [REDACTED] stated that [REDACTED] father is [REDACTED]. She stated that he lives with his mother. She stated that they are not married. She stated that he works at [REDACTED]. She stated that he does not know anything about her drug use. Ms. [REDACTED] stated that she lives with her father, [REDACTED] and her grandmother, [REDACTED]. She stated that [REDACTED] goes to [REDACTED] Elementary School.

Ms. [REDACTED] stated that she did not work. She stated that she would borrow money from different people to buy the pills. She stated that she would pay \$25 to \$30 dollars per pill. Ms. [REDACTED] stated that she has done A&D treatment through [REDACTED] in the past. She stated that she did a 7 day detox. She stated that she relapsed because she started seeing her mother, [REDACTED], again. She stated that her mother is a bad influence on her. She stated that she has been using for 2-3 years. Ms. [REDACTED] stated that she does not have any mental health history and that she has not done any counseling. She stated that she does not have a history of being abused as a child.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 2/1/13 9:03 PM

Date of Assessment: 2/2/13 12:00 AM

Assessment Type: Initial Closing Other

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.



Tennessee Department of Children's Services

SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

1. Intervention or direct services by worker as part of a safety plan.
2. Use of family, neighbors, or other individuals in the community as safety resources.
3. Use of community agencies or services as immediate safety resources.
4. Have caretaker appropriately protect the victim from the alleged perpetrator.
5. Have the alleged perpetrator leave the home, either voluntarily or in response to legal action.
6. Have the non-offending caretaker move to a safe environment with the child.
7. Legal action planned or initiated - child remains in the home.
8. Other (Specify): _____

Protective Custody Interventions:

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



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SDM™ Safety Assessment

Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

Case Manager: _____

Date: _____

Team Leader: _____

Date: _____