



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 02/10/2013 01:20 PM [REDACTED]
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 02/10/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 02/10/2013 03:04 PM
First Team Leader Assigned: [REDACTED] Date/Time 02/11/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 02/11/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 8 Mos	Neglect Death	Yes	[REDACTED]	[REDACTED]

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]

Referent Address: [REDACTED]

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: None

Narrative: TFACTS: History Search was conducted by [REDACTED] based on information provided by reporter
names spelled as given by reporter

Open Court Custody/FSS/FCIP: No

Closed Court Custody: No

Open CPS: No

Indicated: No

Fatality: No

Screened out: 0



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

History (not listed above): No History found

DUPLICATE REFERRAL: No

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

Reporters name/relationship: [REDACTED] / [REDACTED]

Reporter states: The mother, [REDACTED] delivered her child, [REDACTED] at [REDACTED]. The father is reported to be [REDACTED]. The reporter has no other information about the father other than the fathers name.

The mother has not reported that she has any other children.

[REDACTED] was born at [REDACTED] on [REDACTED]. After [REDACTED] birth, he was transported to [REDACTED] due to [REDACTED] being born at 28 weeks gestation. [REDACTED] was transported to [REDACTED] or his NAS to be observed. There was no NAS score assigned due to [REDACTED] being unstable upon arrival at [REDACTED]. The meconium was collected on 2/8/2013 and the results are pending. The urine test on [REDACTED] was not collected.

[REDACTED] was pronounced dead at 10:30AM on 2/10/2013. It is believed that [REDACTED] passed away due to a pulmonary hemorrhage.

Upon delivery, the mother tested positive for oxycodone. The mother has Hepatitis B and C. The mother reports that she has been an IV drug user for 2-5 years. The mother reported using daily before pregnancy and weekly during pregnancy. It is unknown if the mother received prenatal care.

The mother had previously lost a baby at birth. That baby was at 28 weeks gestation and the mother lost the pregnancy due to gastric rupture.

The hospital is requesting that DCS make immediate contact via phone for disposition on the body. The hospital is seeking assistance on if DCS will conduct an investigation, if LE needs to be contacted, and who should the body be released to.

Per SDM: Investigative Track / P1 - [REDACTED] CM 3 on 2-10-13 at 2:15 P.M.

[REDACTED] County paged at 2:15 P.M. Event [07]Group Started [REDACTED] Status: [07]Group Started [REDACTED]

[REDACTED] County paged at 2:36 P.M. Event [07]Group Started [REDACTED] Status: [07]Group Started, [REDACTED]

[REDACTED] responded to this intake at 2:37pm (Central Time). - CM [REDACTED]

Child fatality group notified. Email sent to: [REDACTED]



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: 1 Yr 8 Mos
Address: [REDACTED] [REDACTED] [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: 25 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
Tennessee Child Abuse Hotline Summary**

Name: [REDACTED]

Gender: Male

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

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: 02/10/2013

Assignment Date: 02/11/2013

Street Address:

City/State/Zip:

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 07/10/2014
2	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 07/10/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: This case has been classified as AUPU for Neglect Death and ASPS for Drug Exposed Infant.

D. Case Workers

Case Worker: [REDACTED]

Date: 07/10/2014

Team Leader: [REDACTED]

Date: 07/10/2014

E. Investigation Summary

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

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

The child was premature and died shortly after birth. This child was placed into the NICU at [REDACTED] TN Children's Hospital and was diagnosed with NAS prior to death.

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

Dr. [REDACTED] stated that no doctor could actually come out and say that [REDACTED] premature birth was due to the mother's drug use. Investigator [REDACTED] with [REDACTED] County Sheriff's office, stated that [REDACTED] has had another baby who was premature but survived. This child is also in the NICU in [REDACTED] withdrawing from Opiates.



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

Case Name : ██████████

Investigation ID: ██████████

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

According to CPISA ██████████ notes, ██████████ admitted to shooting up roxycodone while pregnant with ██████████ ██████████ also stated that she took a hydrocodone on the day she went into labor. ██████████ told CPISA ██████████ that she cannot carry a baby to full term due to damage caused by a history of drug use. The father of the baby, ██████████ told CPISA ██████████ that he too used pills with ██████████. ██████████ told CPISA ██████████ that he did not know about ██████████ extensive drug history.

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

The mother, ██████████, delivered her child, ██████████ at ██████████ on ██████████. The father is reported to be ██████████. The reporter has no other information about the father other than the father's name.

The mother has not reported that she has any other children.

██████████ was born at ██████████ on ██████████. After ██████████ birth, he was transported to ██████████ due to ██████████ being born at 28 weeks gestation. ██████████ was transported to ██████████ for his NAS to be observed. There was no NAS score assigned due to ██████████ being unstable upon arrival at ██████████. The meconium was collected on 2/8/2013 and the results are pending. The urine test on ██████████ was not collected.

██████████ was pronounced dead at 10:30AM on 2/10/2013. It is believed that ██████████ passed away due to a pulmonary hemorrhage.

Upon delivery, the mother tested positive for oxycodone. The mother has Hepatitis B and C. The mother reports that she has been an IV drug user for 2-5 years. The mother reported using daily before pregnancy and weekly during pregnancy. It is unknown if the mother received prenatal care.

The mother had previously lost a baby at birth. That baby was at 28 weeks gestation and the mother lost the pregnancy due to gastric rupture.

The hospital is requesting that DCS make immediate contact via phone for disposition on the body. The hospital is seeking assistance on if DCS will conduct an investigation, if LE needs to be contacted, and who should the body be released to.

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

This case was originally assigned to CPISA ██████████. CPISA ██████████ did not collect medical records, did not have adequate drug screens, and did not complete all of the initial paperwork. This case was transferred to CPSI ██████████ on 05/07/2014. CPSI ██████████ found the location of ██████████ because she had a baby in ██████████. ██████████ baby in ██████████ was born premature at 32 weeks, but is still living. ██████████ baby was also diagnosed with NAS as was ██████████. CPSI ██████████ is still working on getting all necessary medical records for the case as there is not a valid release form. CPSI ██████████ has sent a release form to the ██████████ worker, ██████████. ██████████ has stated that ██████████ is doing better and is in an IOP program for her drug addiction. This case was presented to CPIT and the team agreed to unsubstantiate the neglect death and substantiate the drug exposed infant. CPSI ██████████ will mail ██████████ the notice of indication for drug exposed infant via certified mail on 07/18/2014.

Distribution Copies:



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]

Juvenile Court in All Cases
District Attorney in [REDACTED] 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: 09/08/2014

Contact Method:

Contact Time: 07:30 AM

Contact Duration: More than 5 Hours

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/08/2014

Completed date: 09/08/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/08/2014 06:42 AM Entered By: [REDACTED]

After RID review, this case has been approved for closure by [REDACTED] and a further review by [REDACTED] deputy director of investigations. This case will be closed immediately.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/15/2014

Contact Method:

Contact Time: 02:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/15/2014

Completed date: 08/15/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/15/2014 01:44 PM Entered By: [REDACTED]

LI [REDACTED] has submitted this case for approval for closure. CPSI [REDACTED] was transferred this case well after a year. RID approval is pending currently.



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: 07/23/2014 Contact Method: Phone Call
 Contact Time: 08:30 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 08/15/2014
 Completed date: 08/15/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/15/2014 01:52 PM Entered By: [REDACTED]

Child Protective Services Investigator (CPSI) [REDACTED] received a phone call from [REDACTED] on this date. [REDACTED] called because she did not understand her substantiation letter. CPSI [REDACTED] explained what it was and why she received it. [REDACTED] stated that she did use drugs but that [REDACTED] death was not her fault. CPSI [REDACTED] explained that that letter did not indicate her for [REDACTED] death but for the drug use she admitted to while pregnant with [REDACTED]. [REDACTED] asked what she needed to do with the letter. CPSI [REDACTED] stated that if she wanted to appeal her indication, she needed to send the letter to [REDACTED] and the address was in the letter. [REDACTED] stated that she only has 10 days and it would not reach [REDACTED]. CPSI [REDACTED] stated that if she felt that strongly over the indication then she needed to send the letter anyway. [REDACTED] thanked CPSI [REDACTED] and stated that she appreciated CPSI for taking the time to answer her questions. CPSI [REDACTED] told [REDACTED] to call back anytime if she had additional questions. The call was ended.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] [REDACTED] [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/17/2014 Contact Method:
 Contact Time: 01:12 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 07/17/2014
 Completed date: 07/17/2014 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)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/17/2014 12:14 PM Entered By: [REDACTED]

Investigator [REDACTED] is closing this case today.

Case was assigned on 02/10/2013. Response was met on 02/10/2014.

Why they came to the attention of the department-CPS received a referral for allegations of Drug Exposed Infant (DEI) and Neglect Death (NGD).

What was found- This case was originally assigned to CPSA [REDACTED] CPSA [REDACTED] did not collect medical records, did not have adequate drug screens, and did not complete all of the initial paperwork. This case was transferred to CPSI [REDACTED] on 05/07/2014. CPSI [REDACTED] found the location of [REDACTED] because she had a baby in [REDACTED] baby in [REDACTED] was born premature at 32 weeks, but is still living. [REDACTED] baby was also diagnosed with NAS as was [REDACTED] CPSI [REDACTED] is still working on getting all necessary medical records for the case as there is not a valid release form. CPSI [REDACTED] has sent a release form to the [REDACTED] worker, [REDACTED] [REDACTED] has stated that [REDACTED] is doing better and is in an [REDACTED] program for her drug addiction. This case was presented to CPIT and the team agreed to unsubstantiate the neglect death and substantiate the drug exposed infant. CPSI [REDACTED] will mail [REDACTED] the notice of indication for drug exposed infant via certified mail on 07/18/2014.

All assessments that pertain to this case have been completed and submitted for approval.

A copy of the 740 was given to LI [REDACTED] who turned it in to [REDACTED] [REDACTED] Juvenile Court. This case is being closed as AUPU for neglect death and ASPS for drug exposed infant.



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: 07/17/2014 Contact Method: Correspondence
 Contact Time: 10:31 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 07/17/2014
 Completed date: 07/17/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notification of Classification
 Contact Sub Type: Letter A - Notice of Indication to Perpetrator

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

Narrative Type: Original Entry Date/Time: 07/17/2014 09:33 AM Entered By: [REDACTED]

CPSI [REDACTED] will be sending [REDACTED] [REDACTED] the Notification of Indication to her new address: [REDACTED]
 [REDACTED]. This letter will go out on 07/18/2014 via certified mail.



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: 07/17/2014

Contact Method:

Contact Time: 10:11 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/17/2014

Completed date: 07/17/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/17/2014 09:14 AM Entered By: [REDACTED]

CPSI [REDACTED] will retrieve medical records from [REDACTED] and [REDACTED] in regards to [REDACTED] and [REDACTED]. CPSI [REDACTED] has faxed a release of information to [REDACTED] at [REDACTED] [REDACTED] is the CPS worker in [REDACTED] handling [REDACTED] new baby.



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: 07/15/2014 Contact Method: Face To Face
 Contact Time: 09:00 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 07/17/2014
 Completed date: 07/17/2014 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)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/17/2014 09:30 AM Entered By: [REDACTED]

Date: 07/15/2014

Purpose of Contact: Present Case to Child Protective Investigation Team (CPIT) Meeting

Location: [REDACTED] DCS Office

Present:

[REDACTED] CPSI
 [REDACTED] LI
 RC [REDACTED] - Assistant District Attorney General
 [REDACTED] - CAC Director
 [REDACTED] - Mental Health Professional
 [REDACTED] County Detective

Case Name: [REDACTED]

Victim Name: [REDACTED]

Allegations: Drug exposed infant and neglect death

Interview/Discussion:

This case was presented on this date. This case is over a year old. CPSI [REDACTED] added the allegation of drug exposed infant. [REDACTED] was diagnosed with NAS before he passed away. [REDACTED] did admit to shooting up while pregnant with [REDACTED]. The team agreed to substantiate based on the drug exposed infant and unsubstantiate the neglect death as we have no evidence to say that [REDACTED] drug use caused [REDACTED] death.

observation: No Observation Noted

Plan/Decision: ASPS (DEI) and AUPU (NGD)



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: 07/10/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/21/2014

Completed date: 07/21/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/21/2014 12:54 PM Entered By: [REDACTED]

LI [REDACTED] and CPSI [REDACTED] staffed this case. CPSI will be presenting this case on 7/15 to CPIT. At the current time there is insufficient evidence to support a finding of child fatality on the mother's part. There is clear evidence that the mother used drugs but does not rise to the level that would support the fatality of the child. The mother is currently in [REDACTED] where she gave birth to another baby who has been diagnosed with NAS and is receiving treatment there. After CPIT case will be submitted for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/10/2014 Contact Method: Phone Call
 Contact Time: 09:00 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 07/17/2014
 Completed date: 07/17/2014 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: 07/17/2014 09:09 AM Entered By: [REDACTED]

CPSI [REDACTED] received information from LI [REDACTED] about [REDACTED] living in [REDACTED] LI [REDACTED] gave CPSI [REDACTED] information and stated she is the worker in [REDACTED] CPSI called [REDACTED] stated that [REDACTED] got pregnant in [REDACTED] and then came to [REDACTED] stated that her current baby was born at 32 weeks and is in the NICU. [REDACTED] stated that the father of the baby is still in [REDACTED] County and is said to be incarcerated. [REDACTED] stated that [REDACTED] tested positive for opiates. [REDACTED] stated that [REDACTED] did have a prescription for medication while in the hospital. [REDACTED] stated that [REDACTED] last drug screen had her positive for methamphetamine. [REDACTED] stated that she went to [REDACTED] home to do a pill count because [REDACTED] was prescribed wellbutrin and oxycodone. [REDACTED] stated that on Friday, 07/04/2014, she had the pills filled and on Monday, 07/07/2014, the pills were gone. [REDACTED] stated that she is staffing this case for a removal. CPSI [REDACTED] asked [REDACTED] if a release of information could be faxed over to her and she have [REDACTED] fill it out and send it back. [REDACTED] agreed. CPSI [REDACTED] will request medical records since CPSA [REDACTED] did not inquire any medical records for this case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/09/2014	Contact Method:	Phone Call
Contact Time:	04:15 PM	Contact Duration:	Less than 01 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/09/2014
Completed date:	07/09/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 07/09/2014 03:29 PM Entered By: [REDACTED]
 7/9/14
 4:15pm

LI [REDACTED] received a call from CPSI [REDACTED] from [REDACTED] [REDACTED]. She was calling inquiring about the case here as the mother, [REDACTED] had given birth to a baby there. That baby was born at 32 weeks premature and was positive for opiates. The baby is in NICU currently there with no discharge date. We did exchange information regarding the mother regarding drug use.



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: 06/17/2014

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/09/2014

Completed date: 07/09/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/09/2014 10:25 AM Entered By: [REDACTED]

LI [REDACTED] and CPSI [REDACTED] staffed this case. This is a child fatality case. The case is open and concerning whether the mother's prenatal drug use led to the baby's death after birth. At the current time CPSI [REDACTED] does have the file. CPSI [REDACTED] and LI [REDACTED] together reviewed the file. The signed releases obtained earlier by CM [REDACTED] was not completely filled out. There are dates on the forms, but the forms are now outdated. The medical records cannot be obtained now due to the out of date releases. A review of the genogram has no information to locate the mother. The mother's whereabouts are not known but it is thought that she is in [REDACTED]. CPSI [REDACTED] is working with local law enforcement to locate the mother. At the current time it is not believed that one can say that with medical documentation that has been obtained that the drug use led to the baby's death. CPSI [REDACTED] will need to present this case to CPIT 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: 06/10/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/17/2014

Completed date: 07/17/2014

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: 07/17/2014 08:59 AM Entered By: [REDACTED]

CPSA [REDACTED] attended CPIT for this case on this date in [REDACTED]. At this meeting, CPSA [REDACTED] contacted CPSI [REDACTED] and interviewed Dr. [REDACTED] regarding the premature birth. Dr. [REDACTED] stated that no doctor can say that the drug use caused early labor. Dr. [REDACTED] stated that if the mother caused the death, it would be written in the autopsy report which it isn't. CPSI [REDACTED] will try to contact [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: 06/05/2014

Contact Method: Face To Face

Contact Time: 10:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/17/2014

Completed date: 07/17/2014

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: 07/17/2014 09:02 AM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] Detective, [REDACTED]. Detective [REDACTED] stated that he would run [REDACTED] info through the system to try to find where she may be located. CPSI [REDACTED] thanked Detective [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: 06/03/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/03/2014

Completed date: 06/03/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/03/2014 03:11 PM Entered By: [REDACTED]

This case was staffed with CPSI [REDACTED] LI [REDACTED] and IC [REDACTED]. This case was transferred to CPSI [REDACTED]. This is a severely overdue case from [REDACTED]. CPSI [REDACTED] is working with [REDACTED]. CPSI needs to speak with medical staff but must first locate the file. CPSI was advised to contact CPSA [REDACTED] who had the the case for over a year.



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: 05/12/2014 Contact Method: Phone Call
 Contact Time: 09:37 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 07/17/2014
 Completed date: 07/17/2014 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: 07/17/2014 08:54 AM Entered By: [REDACTED]

CPSI [REDACTED] spoke with DCS Regional Nurse, [REDACTED] on this date. [REDACTED] stated that IC [REDACTED] had called for a second autopsy on this child. [REDACTED] stated that she called [REDACTED] and confirmed that there was a 2nd autopsy completed. [REDACTED] stated that the [REDACTED] Medical Examiner stated there was not another autopsy completed. [REDACTED] stated that the DA wanted to know from a doctor if [REDACTED] drug use caused the early labor. [REDACTED] stated that if the OBGYN could confirm that, the DA can prosecute [REDACTED] if not then she would not be prosecuted. [REDACTED] stated that Detective [REDACTED] was assigned to this case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/21/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/21/2014

Completed date: 04/21/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/21/2014 09:03 AM Entered By: [REDACTED]

[REDACTED] notified TC [REDACTED] and TL [REDACTED] that autopsy has been completed and that a copy has been [REDACTED] DCS. Case will be presented again at CPIT in May for closure. CM [REDACTED] will present case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/10/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/10/2014

Completed date: 01/10/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/10/2014 08:19 AM Entered By: [REDACTED]

Case continues to be held open per CPIT. Waiting on second opinion on autopsy. CM is contacting ME for [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/20/2013

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/20/2013

Completed date: 11/20/2013

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: 11/20/2013 11:54 AM Entered By: [REDACTED]

[REDACTED]
 Still waiting on Autopsy second opinions and CPIT approval to close. Case is overdue and cannot be closed until CPIT approval per policy.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/10/2013

Contact Method:

Contact Time: 10:45 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/10/2013

Completed date: 09/10/2013

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: 09/10/2013 09:50 AM Entered By: [REDACTED]

This case was transfer from CM [REDACTED] who is currently on leave. This case is being held open awaiting the results of the autopsy.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/23/2013

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/23/2013

Completed date: 07/23/2013

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: 07/23/2013 09:27 AM Entered By: [REDACTED]

7/23/13 CPIT staffed on this date and agreed to hold till August due to the ME re-evaluating the autopsy [REDACTED] ested by the DA's office and LE. Case is over-due. There are no other children in the home. ACV is deceased.



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:	07/23/2013	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	07/23/2013
Completed date:	07/23/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 07/23/2013 09:27 AM Entered By: [REDACTED]

7/23/13 CPIT staffed on this date and agreed to hold till August due to the ME re-evaluating the autopsy [REDACTED] ested by the DA's office and LE. Case is over-due. There are no other children in the home. ACV is deceased.



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: 07/11/2013

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/12/2013

Completed date: 07/12/2013

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: 07/12/2013 01:30 PM Entered By: [REDACTED]

CM reports that autopsy has been received and finds that the death was the result of natural causes. [REDACTED] sent and staffed at CPIT on 7/23/13.



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: 05/01/2013

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/01/2013

Completed date: 05/01/2013

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: 05/01/2013 10:50 AM Entered By: [REDACTED]

[REDACTED] case is currently overdue. This is a child fatality case that is being held open by CPIT until [REDACTED] can be obtained. Case notes need to be entered and case needs to be in compliance with policy.



**Tennessee Department of Children's Services
Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/10/2013 Contact Method: Face To Face
 Contact Time: 05:00 PM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 02/14/2013
 Completed date: 02/14/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): ACV Interview/Observation,Alleged Perpetrator Interview,Collateral Contact,Initial ACV Face To Face,Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/14/2013 04:04 PM Entered By: [REDACTED]

CM [REDACTED] arrived at [REDACTED] on 02/10/2013 at approximately 5:00 PM. CM [REDACTED] retrieved records for [REDACTED] and [REDACTED]. Nursing staff had stated that CM [REDACTED] would not be allowed to take photographs and that [REDACTED] would be tasked to the Medical Examiner. CM [REDACTED] examined the [REDACTED] who had what appeared to be broken blood vessels on the side of his face and bloody tissue coming from his nose. [REDACTED] skin was slightly discolored. The nursing staff kept [REDACTED] in a hospital bassinette tray and covered with a blanket. Staff present stated that they had not observed contact with [REDACTED] and [REDACTED].

CM [REDACTED] met with [REDACTED] at [REDACTED]. [REDACTED] was visibly upset when CM [REDACTED] arrived. [REDACTED] stated that she had lost a child at 27 weeks in 2007 and that this was her 4th pregnancy but that she does not have any kids. [REDACTED] stated that she cannot carry a child full term due to damage caused by a history of drug use which caused a portion of her stomach to be removed. [REDACTED] stated that she did know that taking pills and shooting up is harmful to the baby and that's why she was trying to quit. [REDACTED] stated that she was shooting up Roxycodone then took a Hydrocodone on the day she went into labor. [REDACTED] stated that she had been weaning down but slipped up and took what she was told was a hydrocodone from a friend. [REDACTED] described the pill as a half a circle, white pill. [REDACTED] had tested positive for Oxycodone and when asked why this contradicted her statement of type of pill she stated she knows the person who provided it called it a Hydro but she does not know what it actually was and that she does not have a prescription for anything because she cannot afford to go to the doctor. [REDACTED] stated that she wears the ashes of her child that died in a locket on her neck.

CM [REDACTED] met with [REDACTED] at [REDACTED]. [REDACTED] stated that he had used pills with [REDACTED] until they found out that she was pregnant then he stopped when she began to wean down. [REDACTED] stated he did not know she had taken a pill on the day she was in labor until the drug screen came back positive for oxycodone but did know of her history of drug use. [REDACTED] stated that he would test positive for THC but nothing else. CM [REDACTED] went to his truck to retrieve a drug screen and drug screen form. CM [REDACTED] had run out of drug screen forms and drafted a form on paper. [REDACTED] initially refused to allow a screen once CM [REDACTED] returned to the room as he no longer had any children. CM [REDACTED] advised [REDACTED] that he had the right to refuse a drug screen but asked that he sign stating that he refused a drug screen. [REDACTED] decided to receive his drug screen to prove that he had only used THC. [REDACTED] test came back only



**Tennessee Department of Children's Services
Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

for THC and no other substances.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/10/2013

Contact Method: Phone Call

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 02/14/2013

Completed date: 02/14/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/14/2013 04:00 PM Entered By: [REDACTED]

CM [REDACTED] phoned the referent who stated that to their knowledge no one had called in another referral regarding this case though the child was born on [REDACTED] and the mother tested positive for Oxycodone. The referent stated she would notify law enforcement.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/10/2013 Contact Method:
 Contact Time: 03:16 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 02/10/2013
 Completed date: 02/10/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community, Service Planning
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/10/2013 03:08 PM Entered By: [REDACTED]

Central Intake contacted supervision at 3:16PM to notify of a child fatality in [REDACTED] County. Supervision contacted Central Intake at 3:36PM to advise them the referral was received.

Supervision contacted on-call CPS Case Manager [REDACTED] at 3:20PM and notified him of the P1 referral. CM [REDACTED] has never worked a child fatality case. CM [REDACTED] was provided the first steps to take as well as the Child Fatality Report that has to be submitted when hes done working today. CM [REDACTED] will contact the hospital and law enforcement to advise them of he will be in route.

Supervision contacted [REDACTED] TL [REDACTED] at 3:22PM and advised him of the child fatality.

Supervision contacted TC [REDACTED] at 3:28PM and advised her of the child fatality at [REDACTED]

Supervision conducted a TFACTS history search on [REDACTED] (mother) and found no history.

Supervision conducted a TFACTS history search on [REDACTED] (father) and found no history.

Supervision conducted a TFACTS history search on [REDACTED] (ACV) and found no history. An intake search was also completed on the day of the childs birth, [REDACTED] and no referral was found. There does not appear to be a referral called in to Central Intake regarding this child being possibly drug exposed.

Narrative Type: Addendum 6 Entry Date/Time: 02/10/2013 06:48 PM Entered By: [REDACTED]

CM [REDACTED] contacted supervision at 7:21PM to review the information. The father initially refused to take a drug screen. An uncle arrived at the hospital and told the father there were no kids in their home and he didnt have to take one. The father did disclose that he would likely be positive for marijuana. The father later agreed to take a UDS and tested positive only for marijuana. The uncle reported that he knows the parents need to clean from drugs and theyre working on that together. The uncle stated hes been clean from drugs for 6 months.

The mother stated that she wanted her baby cremated so she can put his ashes on her chest. She has the ashes of her other



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

baby on her chest. This is the mothers 4th pregnancy and her second loss after the baby has been born. Both babies were born at 28 weeks gestation. The mother has difficulty carrying a pregnancy.

The father stated he saw the hospital staff put a tube down their baby's throat to help him breathe. They saw the tube making the babies stomach and chest move up and down. They believe thats what caused their baby to begin bleeding.

The mother stated that a staff member from [REDACTED] told her she would be charged with involuntary manslaughter.

Narrative Type: Addendum 5 Entry Date/Time: 02/10/2013 05:31 PM Entered By: [REDACTED]

CM [REDACTED] contacted supervision at 6:13PM after he spoke with the mother at [REDACTED] hospital. The mother stated that she last used Oxycodone through IV use before she found out she was pregnant. The mother stated that her doctor told her not to just stop using, but to taper off. She did not use drugs through an IV while she was pregnant but was taking Hydrocodone orally. The mother stated that she slipped up and took a Hydrocodone a day before delivering, because her back was hurting.

CM [REDACTED] stated according to the records the mother tested positive for oxycodone at the time of the birth on 2/8/13 at 1:15AM.

There are no other children in the home. Neither the father nor the mother has any other children. CM [REDACTED] stated the mother is very distraught and the father isnt saying much. The father did state that he knew about the mothers drug use. The mother stated she did not know it was harmful to the baby to be using drugs while she was pregnant.

CM [REDACTED] reported he did view the babys body while he was at [REDACTED]. CM [REDACTED] stated the baby was small because he was premature. There was bloody discharge coming out of his nose. From what CM [REDACTED] was told there was blood on the brain and thats what killed the baby.

Supervision asked CM [REDACTED] to drug screen the father.

CM [REDACTED] can complete a further interview of the parents once the mother is discharged from the hospital. The mother is very distraught of the death of the baby.

Narrative Type: Addendum 4 Entry Date/Time: 02/10/2013 04:41 PM Entered By: [REDACTED]

CM [REDACTED] contacted supervision at 5:28PM to report [REDACTED] nurse is not allowing him to take pictures of the deceased baby. The nurse contacted the Critical Care Director and they stated it was the job of the medical examiner to take pictures. CM [REDACTED] was advised to contact Det. [REDACTED] to make sure she was okay with that. CM [REDACTED] reported back to supervision that him not taking pictures of this infant is okay as the medical examiner will do that. CM [REDACTED] will view the body of the baby and look specifically for any suspicious marks or injuries and document such.

Narrative Type: Addendum 3 Entry Date/Time: 02/10/2013 03:47 PM Entered By: [REDACTED]

CM [REDACTED] contacted supervision to report he spoke with Det. [REDACTED] from the [REDACTED] Sheriff's Department. Det. [REDACTED] stated that she will order an autopsy on the baby and contact the mother to advise her of the investigation. Det. [REDACTED] will not come to the hospital but stated it was okay for CM [REDACTED] to speak with the mother. Det. [REDACTED] will complete the paperwork to be submitted to [REDACTED].

Narrative Type: Addendum 2 Entry Date/Time: 02/10/2013 03:32 PM Entered By: [REDACTED]

Supervision also conducted an intake search in TFACTS on 2/8/13 and 2/9/13 for [REDACTED] County and found that no referral had been called in to Central Intake regarding this child.

Narrative Type: Addendum 1 Entry Date/Time: 02/10/2013 03:26 PM Entered By: [REDACTED]

CM [REDACTED] contacted supervision at 4:13PM to advise he is in route to [REDACTED]. He contacted [REDACTED] and found out the mother is still at [REDACTED] as shes not yet been discharged. The parents have requested the baby be cremated. CM [REDACTED] contacted the [REDACTED] Police Department and also asked [REDACTED] to contact them to make a report.



**Tennessee Department of Children's Services
Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CM [REDACTED] will call Det. [REDACTED] to find out who has been assigned this investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	02/10/2013	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	07/17/2014
Completed date:	07/17/2014	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)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/17/2014 08:47 AM Entered By: [REDACTED]

On February 10, 2013 at 2:20 PM EST, a referral was called into Child Abuse Hotline. The referral was screened into [REDACTED] as P1 with the allegations of Neglect Death (NGD). The alleged child victim is [REDACTED] 0 days. The alleged perpetrator is [REDACTED] biological mother. Response is due on February 11, 2013 by 2:20 PM EST. The case is assigned to CM [REDACTED]. It is not known if this child is of Native American descent. This information will need to be obtained when response is met. A follow up phone call will be made and documented with the referent within 15 working days of referral per policy.

DCS Case History: This family has no history with the department.

Address: [REDACTED]

At the conclusion of this case, a 740 will be submitted to the supervisor to be reviewed and signed, and then submitted to the Juvenile Court on a weekly basis as requested by the court.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED] TN DCS Intake ID #: [REDACTED]
 County: [REDACTED] Worker:
 Date of Referral: 2/10/13 1:20 PM Date of Assessment: 2/21/13 12:00 AM
 Assessment Type: Initial Number of Children in the Household: 1

Section 1: Immediate Harm Factors

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

Yes No

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



Tennessee Department of Children's Services

SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

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

Protective Custody Interventions:

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



Tennessee Department of Children's Services
SDM™ Safety Assessment

Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

Case Manager: _____

Date: _____

Team Leader: _____

Date: _____