

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

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 06/03/2013 01:11 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 06/03/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 06/03/2013 06:03 PM
First Team Leader Assigned: [REDACTED] Date/Time 06/03/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 06/03/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	11 Yrs	Neglect Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	12 Yrs	Neglect Death	Yes	[REDACTED]	Birth Mother

Referent(s)

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

Referent Address:

Referent Phone Number:

Type of Contact: I-3 Phone

Notification: None

Narrative: TFACTS:

Open Court Custody/FSS/FCIP No
Closed Court Custody No
Open CPS - No
Indicated No
Fatality No
Screened out 0
History (not listed above): No

County: [REDACTED]
Notification: None
School/ Daycare: Not given
Native American Descent: No
Directions: None given



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

Reporters name/relationship: [REDACTED]

Reporter states: [REDACTED] (12 years), [REDACTED] (11 years), and [REDACTED] (5 years) reside with their mother, [REDACTED]. The reporter has no information on the father(s) of the children.

[REDACTED] has Aspergers.

[REDACTED] and [REDACTED] left the home at approximately 11 am this morning to go to the Dollar General Store, approximately 8 miles away from home. [REDACTED] reported that she left [REDACTED] watching TV in [REDACTED] room, and [REDACTED] was in bed in his room.

[REDACTED] reported that before she got to the store, her cousin, who lives across the street observed that the house was on fire and had already called 911. It is believed that it was very rapid fire that possibly started in the kitchen. [REDACTED] and [REDACTED] are both deceased.

[REDACTED] and [REDACTED] are presently on the scene with family members. The bodies are at the morgue, and will probably be autopsied today.

County group emailed.

Per SDM: P1/Investigation, [REDACTED] TL on 6-3-13 @ 1:41 pm

Notified Child Fatality Group:

[REDACTED], and the

Child-Fatality-Notification EI-DCS.

[REDACTED] and RA [REDACTED] were copied on the notification email.



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 11 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

Date of Birth [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Black/African Age: 12 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 49 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 6 Yrs

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: 06/03/2013

Assignment Date: 06/03/2013

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]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED]
					[REDACTED]			09/07/2013
2	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED]
					[REDACTED]			09/07/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: CPSI [REDACTED] is closing the case as Allegation Unfounded / Perpetrator Unfounded due to [REDACTED] and [REDACTED] died of thermal injuries and smoke inhalation. Per Policy 14.7 this classification is appropriate due to there being insufficient information and evidence to support the opinion that the alleged incident occurred or harmful situation existed.

D. Case Workers

Case Worker: [REDACTED]

Date: 09/07/2013

Team Leader: [REDACTED]

Date: 09/07/2013

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:

CPSI [REDACTED] attempted to speak with [REDACTED] but he did not want to speak with anyone.

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

CPSI [REDACTED] spoke with the Medical Examiner office on 6/4 via phone. The medical examiner stated that the preliminary findings were that the [REDACTED] and [REDACTED] died of thermal injuries and smoke inhalation. The medical examiner stated [REDACTED] and [REDACTED] were alive prior to the fire. The medical examiner stated it was most like from the smoke.

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



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

Case Name : ██████████

Investigation ID: ██████████

CPSI ██████ spoke with Ms. ██████ on 6/3 outside of the family home. Ms. ██████ stated she and her 5 year old son, ██████ (5) woke up about 8:30am on 6/3. Ms. ██████ stated when they woke up they were watching television. Ms. ██████ stated she heated up a pork chop in the toaster oven and ██████ (5) ate a piece of cheesecake. Ms. ██████ stated ██████ (12) and ██████ (11) were still sleep. Ms. ██████ stated her and ██████ (5) began getting dressed so she could go to the store. Ms. ██████ stated ██████ (12) woke up before she left and she told ██████ (12) she was about to run to Dollar General to get some milk. Ms. ██████ stated ██████ (12) asked her for some candy and she told ██████ (12) no because she had been buying for her all weekend. Ms. ██████ stated she and ██████ (5) left the family home about 11:00am. Ms. ██████ stated she clean out her van a little bit then left the family home. Ms. ██████ stated when she left ██████ (12) was in her room watching television and ██████ was in his room sleeping. Ms. ██████ stated she was about 5 minutes away when her cousin, Ms. ██████ called her and stated her home was on fire. Ms. ██████ stated she turned around immediately and came back home. Ms. ██████ stated ██████ (12), ██████ (11), and ██████ (5) father is Mr. ██████, who is an over the road truck driver. Ms. ██████ stated ██████ (5) attends ██████ Elementary School due to problems with ██████ speech. Ms. ██████ stated Mr. ██████ believed ██████ probably had Aspergers syndrome but he was never diagnosed. Ms. ██████ stated she was still married to Mr. ██████. when she gave birth to ██████ and ██████ CPSI ██████ administered a drug screen to Ms. ██████ on 6/3 and she tested negative for all substances.

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

CPSI ██████ spoke with Mrs. ██████ on 6/3 at her home. Ms. ██████ stated she was cleaning up in the back of her home and she something told her to go the front of the home. Ms. ██████ stated she looked outside and seen smoke coming from the home. Ms. ██████ stated she called the police and went outside. Ms. ██████ stated she seen two men that had pulled up and asked was anyone in the home. Ms. ██████ stated she did not see Ms. ██████ van so she called her. Ms. ██████ stated Ms. ██████ stated ██████ (12) and ██████ (11) was in the home. Mrs. ██████ stated she told the men and they tried to get them out. Ms. ██████ stated Ms. ██████ was a great mother and she never had concerns of abuse or neglect in regards to ██████ (12), ██████ (11), and ██████ (5).

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

no additional evidence

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: 09/09/2013

Contact Method: Face To Face

Contact Time: 12:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 09/09/2013

Completed date: 09/09/2013

Completed By: [REDACTED]

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

Contact Type(s): Notation,Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/09/2013 02:50 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] on 09/09/2013 at [REDACTED] Elementary School. [REDACTED] stated everything is going well. [REDACTED] stated he enjoys his new school.

Section V: CPSI observed:

2. observation and presentation CPSI [REDACTED] observed [REDACTED] on this date and he appeared well dressed for the weather. CPSI [REDACTED] did not observe any marks or bruises on [REDACTED]

Section VI: Next Steps:

CPSI [REDACTED] will close this case due to all investigative tasks being completed and no additional concerns of safety, permanency, and well being.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/07/2013

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/07/2013

Completed date: 09/07/2013

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: 09/07/2013 02:00 PM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) completed the closing Safety Assessment. There are no current immediate harm factors or interventions. The safety decision is: 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.

CPSI [REDACTED] is closing the case as Allegation Unfounded / Perpetrator Unfounded due to [REDACTED] and [REDACTED] died of thermal injuries and smoke inhalation. Per Policy 14.7 this classification is appropriate due to there being insufficient information and evidence to support the opinion that the alleged incident occurred or harmful situation existed. A copy of the 740 was sent to the Judge. A copy of the 740 was sent to the DA. Child Protective Services Investigator [REDACTED] (CPSI) entered the classification into the classification tab in TFACTS.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/14/2013

Contact Method: Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/07/2013

Completed date: 09/07/2013

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: 09/07/2013 02:05 PM Entered By: [REDACTED]

CPSI [REDACTED] staffed this case with the CPIT on 8/14. The CPIT made an agreement to classify this case as Allegation Unfounded / Perpetrator Unfounded.

Sgt. [REDACTED] stated the Fire Marshall stated they feel it was an electrical fire. Sgt. [REDACTED] stated the family had two power strips full of plugs and almost everything was plugged into these two strips. Sgt. [REDACTED] stated the family had seven televisions in the living that were not working.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/09/2013

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/07/2013

Completed date: 09/07/2013

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: 09/07/2013 02:13 PM Entered By: [REDACTED]

CPSI [REDACTED] received a copy of [REDACTED] and [REDACTED] [REDACTED] autopsy report on 08/09 which stated [REDACTED] and [REDACTED] [REDACTED] died of thermal injuries and smoke inhalation. A Copy of the autopsy is located in the CPS file and in TFACTS under documents in investigation ID# [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: 07/23/2013 Contact Method: Face To Face
 Contact Time: 11:00 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/07/2013
 Completed date: 09/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/07/2013 02:36 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with Ms. [REDACTED] on 07/28 at the family home. Mrs. [REDACTED] stated she recently got married to Mr. [REDACTED]. Mrs. [REDACTED] stated she is still trying to put her life back together. Mrs. [REDACTED] stated she hates going to the grocery store some time because everyone knows who she is due to the media. CPSI [REDACTED] explained to Mrs. [REDACTED] that they are waiting for the autopsy. Mrs. [REDACTED] stated [REDACTED] will be attending [REDACTED] in the fall. Mrs. [REDACTED] stated she has started school shopping.

Section V: CPSI observed:

1. interactions between mother/father and child, CPSI [REDACTED] observed positive interaction between [REDACTED] and Ms. [REDACTED]
2. observation and presentation CPSI [REDACTED] observed [REDACTED] on this date and he appeared well dressed for the weather. CPSI [REDACTED] did not observe any marks or bruises on [REDACTED]
4. observation of physical environment (inside and outside) CPSI [REDACTED] went to the family home on this date. The home was clean and appropriate. There was food in the home and all utilities appeared to working properly.

Section VI: Next Steps:

CPSI [REDACTED] will continue to monitor the case and conduct monthly face to face visits, to insure safety, permanency, and well being.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/12/2013 Contact Method: Face To Face
 Contact Time: 11:00 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/07/2013
 Completed date: 09/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/07/2013 02:37 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with Ms. [REDACTED] on 07/12 at the family home. Mrs. [REDACTED] stated they moved into a new home. Mrs. [REDACTED] stated the money that people donated to her family she used to pay the rent for the next 6 months. Mrs. [REDACTED] stated they have been doing ok. Ms. [REDACTED] stated she still has her moments but she did attend counseling. Mrs. [REDACTED] stated Mr. [REDACTED], [REDACTED] and [REDACTED] father came to the family home and stayed for a while but he took it really hard.

Section V: CPSI observed:

1. interactions between mother/father and child, CPSI [REDACTED] observed positive interaction between [REDACTED] and Ms. [REDACTED]
2. observation and presentation CPSI [REDACTED] observed [REDACTED] on this date and he appeared well dressed for the weather. CPSI [REDACTED] did not observe any marks or bruises on [REDACTED]
4. observation of physical environment (inside and outside) CPSI [REDACTED] went to the family home on this date. The home was clean and appropriate. There was food in the home and all utilities appeared to working properly.

Section VI: Next Steps:

CPSI [REDACTED] will continue to monitor the case and conduct monthly face to face visits, to insure safety, permanency, and well being.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/10/2013

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/07/2013

Completed date: 09/07/2013

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: 09/07/2013 02:06 PM Entered By: [REDACTED]

CPSI [REDACTED] staffed this case with the CPIT on 7/10. The CPIT made an agreement to carry this case over.



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: 06/19/2013

Contact Method: Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/07/2013

Completed date: 09/07/2013

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: 09/07/2013 02:07 PM Entered By: [REDACTED]

CPSI [REDACTED] staffed this case with the CPIT on 6/19. The CPIT made an agreement to carry this case over.



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: 11:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 01:41 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with the Medical Examiner office on 6/4 via phone. The medical examiner stated that the preliminary findings were that the [REDACTED] and [REDACTED] died of thermal injuries and smoke inhalation. The medical examiner stated [REDACTED] and [REDACTED] were alive prior to the fire. The medical examiner stated it was most like from the smoke.



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: 10:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

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 01:47 PM Entered By: [REDACTED]

CPS received this case on 06/04/2013 as a (P1) at 1:11pm with allegations of Neglect Death. The victim is listed as [REDACTED] and [REDACTED] and the perpetrator is [REDACTED]. The referral was assessed and assigned by TL, [REDACTED] on 06/03/2013 to CPSI [REDACTED] Response is due on 06/04/2013

Referral Summary: [REDACTED] (12 years), [REDACTED] (11 years), and [REDACTED] (5 years) reside with their mother, [REDACTED] has Aspergers.

[REDACTED] and [REDACTED] left the home at approximately 11 am this morning to go to the Dollar General Store, approximately 8 miles away from home. [REDACTED] reported that she left [REDACTED] watching TV in [REDACTED] room, and [REDACTED] was in bed in his room. [REDACTED] reported that before she got to the store, her cousin, who lives across the street observed that the house was on fire and had already called 911. It is believed that it was very rapid fire that possibly started in the kitchen. [REDACTED] and [REDACTED] are both deceased. [REDACTED] and [REDACTED] are presently on the scene with family members. The bodies are at the morgue, and will probably be autopsied today.

CPSI [REDACTED] verified the familys history of involvement with DCS through a search with DCS through a search of TNKids/TFACTS and the following history was found: No history Found

Initial Family Composition:

[REDACTED] Birth mother, AP
 [REDACTED] - ACV
 [REDACTED] ACV
 [REDACTED] ACVs brother
 [REDACTED] ACVs biological father

Notification of referral was sent to the Judge.
 Notification of this referral was sent to the District Attorney.

CPSI faxed the referral to Sergeant [REDACTED] and the Child Advocacy Center in order to convene the Child



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Protective Investigate Team (CPIT).

Notification of referral is unable to be sent due to the referent not leaving an address.

CPSI [REDACTED] completed checks on all adults in the residence and perpetrators at the following websites:

- TN Sex Offender - negative
- National Sex Offender - negative
- TN Felony Offender - negative
- TN Meth Offender - negative
- Abuse Registry - negative

This CPSI [REDACTED] along with the family obtained the following information in order to assess the familys strengths and possible needs/risk:

- Is Current on Immunizations and Doctor: Yes
- Mental Health: None
- Physical health/disabilities: [REDACTED] has speech concerns
- Medications: No
- Domestic Violence: No
- Alcohol/Drug Use: No
- Department History: None
- Education Level: Unknown
- Police History: None
- Employment: Mr. [REDACTED] is an on the road truck driver
- Government Assistance: [REDACTED] receives \$500 in SSI.
- Primary Caretaker history of abuse/neglect: No



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: 08:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

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): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 01:45 PM Entered By: [REDACTED]

CPSI [REDACTED] requested and received the dental records from Dr. [REDACTED] office on 06/04 at Dr. [REDACTED] office for [REDACTED] and [REDACTED]. CPSI [REDACTED] provided a copy of the dental records to [REDACTED] County Sheriffs department, to provide to the medical examiners office to assist with identifying [REDACTED] and [REDACTED]. A copy of the dental records are located in the CPS 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: 06/03/2013

Contact Method: Face To Face

Contact Time: 03:30 PM

Contact Duration: Less than 30

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): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 01:27 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with Mrs. [REDACTED] on 6/3 at her home. Ms. [REDACTED] stated she was cleaning up in the back of her home and she something told her to go the front of the home. Ms. [REDACTED] stated she looked outside and seen smoke coming from the home. Ms. [REDACTED] stated she called the police and went outside. Ms. [REDACTED] stated she seen two men that had pulled up and asked was anyone in the home. Ms. [REDACTED] stated she did not see Ms. [REDACTED] van so she called her. Ms. [REDACTED] stated Ms. [REDACTED] stated [REDACTED] (12) and [REDACTED] (11) was in the home. Mrs. [REDACTED] stated she told the men and they tried to get them out. Ms. [REDACTED] stated Ms. [REDACTED] was a great mother and she never had concerns of abuse or neglect in regards to [REDACTED] (12), [REDACTED] (11), and [REDACTED] (5).



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: 02:00 PM Contact Duration: Less than 03 Hour
 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): ACV Interview/Observation,Alleged Perpetrator Interview,Initial ACV Face To Face,Notation,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 01:24 PM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) made a home visit/face to face to the investigation, follow up with the family to insure safety, well-being and permanency.

[REDACTED] and Ms. [REDACTED] were present during this visit.

In order to engage the family, CPSI explained the current report made to the Tennessee Department of Childrens Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

*Section I: Interview with the child
 CPSI [REDACTED] attempted to speak with [REDACTED] but he did not want to speak with anyone.

*Section II: Interview with the mother
 CPSI [REDACTED] spoke with Ms. [REDACTED] on 6/3 outside of the family home. Ms. [REDACTED] stated she and her 5 year old son, [REDACTED] (5) [REDACTED] woke up about 8:30am on 6/3. Ms. [REDACTED] stated when they woke up they were watching television. Ms. [REDACTED] stated she heated up a pork chop in the toaster oven and [REDACTED] (5) ate a piece of cheesecake. Ms. [REDACTED] stated [REDACTED] (12) and [REDACTED] (11) were still sleep. Ms. [REDACTED] stated her and [REDACTED] (5) began getting dressed so she could go to the store. Ms. [REDACTED] stated [REDACTED] (12) woke up before she left and she told [REDACTED] (12) she was about to run to Dollar General to get some milk. Ms. [REDACTED] stated [REDACTED] (12) asked her for some candy and she told [REDACTED] (12) no because she had been buying for her all weekend. Ms. [REDACTED] stated she and [REDACTED] (5) left the family home about 11:00am. Ms. [REDACTED] stated she clean out her van a little bit then left the family home. Ms. [REDACTED] stated when she left [REDACTED] (12) was in her room watching television and [REDACTED] was in his room sleeping. Ms. [REDACTED] stated she was about 5 minutes away when her cousin, Ms. [REDACTED] called her



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

and stated her home was on fire. Ms. [REDACTED] stated she turned around immediately and came back home. Ms. [REDACTED] stated [REDACTED] (12), [REDACTED] (11), and [REDACTED] (5) father is Mr. [REDACTED] who is an over the road truck driver. Ms. [REDACTED] stated [REDACTED] (5) attends [REDACTED] Elementary School due to problems with [REDACTED] speech. Ms. [REDACTED] stated Mr. [REDACTED] believed [REDACTED] probably had Aspergers syndrome but he was never diagnosed. Ms. [REDACTED] stated she was still married to Mr. [REDACTED] when she gave birth to [REDACTED] and [REDACTED] CPSI [REDACTED] administered a drug screen to Ms. [REDACTED] on 6/3 and she tested negative for all substances.

Section V: CPSI observed:

1. interactions between mother/father and child, CPSI [REDACTED] observed positive interaction between [REDACTED] and Ms. [REDACTED]
2. observation and presentation CPSI [REDACTED] observed [REDACTED] on this date and he appeared well dressed for the weather. CPSI [REDACTED] did not observe any marks or bruises on [REDACTED]
4. observation of physical environment (inside and outside) CPSI [REDACTED] was unable to view the family home due to the fire. Ms. [REDACTED] stated American Red Cross provided for her to stay at [REDACTED] in [REDACTED]

Section VI: Next Steps:

CPSI [REDACTED] will continue to monitor the case and conduct monthly face to face visits, to insure safety, permanency, and well being. American Red Cross set up grief counseling for Ms. [REDACTED] on 6/6/2013 through [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) completed the initial Safety Assessment. There are no current immediate harm factors or interventions. The safety decision is: 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.



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: 02:00 PM

Contact Duration: Less than 45

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): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/04/2013 01:33 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with Sgt. [REDACTED] on 6/3 outside of the family home. Sgt. [REDACTED] stated Ms. [REDACTED] stated she left the home to go to the Dollar General which is less than 8 miles from the home. Sgt. [REDACTED] stated Ms. [REDACTED] stated she did not make it all the way to the Dollar General, before her cousin, Ms. [REDACTED] who lives across the street called her. Sgt. [REDACTED] stated Ms. [REDACTED] stated when her cousin told her home was on fire and she had already called the police and Ms. [REDACTED] turned around. Sgt. [REDACTED] stated one of the Deputies found [REDACTED] (12) by the front of [REDACTED] (11) bedroom door. Sgt. [REDACTED] stated they pulled [REDACTED] (12) out of the fire and she was DOA. Sgt. [REDACTED] stated they could not reach [REDACTED] (11), he was sleep on the bed. Sgt. [REDACTED] stated it was a very rapid fire and one breathe of the smoke could have made them pass out. When CPSI [REDACTED] arrived at the home fire trucks were called back out to let out the fire again. Sgt. [REDACTED] stated they are calling the Fire Marshalls to find out the cause of the fire.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 6/3/13 1:11 PM

Date of Assessment: 6/3/13 12:00 AM

Assessment Type: Initial Closing Other

Number of Children in the Household: 3

Section 1: Immediate Harm Factors

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

Yes No

- 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.
- Yes No 2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
- Yes No 3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
- Yes No 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.
- Yes No 5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
- Yes No 6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
- Yes No 7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
- Yes No 8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
- Yes No 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: _____