



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 06/21/2013 08:27 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 06/21/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 06/24/2013 07:13 AM
First Team Leader Assigned: [REDACTED] Date/Time 06/24/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 06/24/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	5 Yrs	Lack of Supervision	Yes	Unknown Participant [REDACTED] Unknown	Birth Father
[REDACTED]	5 Yrs	Lack of Supervision	Yes	Unknown Participant [REDACTED] Unknown	Birth Mother
[REDACTED]	5 Yrs	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	Other Non-relative

Referent(s)

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

Narrative: TFACTS: Unable to locate any history due to limited information, reporter was not sure of the exact spelling of the victim's name

DUPLICATE REFERRAL: No

County: [REDACTED]
Notification: None
School/ Daycare: Unknown
Native American Descent: Unknown
Directions: Unknown



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Reporters name/relationship: [REDACTED]

Reporter states: The child [REDACTED] (5) resides with his parents (unknown). It is unknown if there are any other children in the home.

The reporter is signed up to receive alerts from the [REDACTED] Newspaper. The following information was discovered through the alert.

[REDACTED] apparently from time to time chases cars up and down his driveway. The family lives on a county road in [REDACTED]

Today, [REDACTED] ended up tripping while chasing cars down the driveway. There was an older gentleman driving down the road, the older gentleman drove over [REDACTED] head.

[REDACTED] was transported to [REDACTED] Hospital where he was declared deceased.

The reporter spoke with Sergeant [REDACTED] with the [REDACTED] police department; it was verified that the child had been taken to the hospital and declared deceased. It is believed that the death has been ruled as an accident.

The reporter does not know any other details.

Per SDM: Investigation-P1 Neglect Death-[REDACTED] Team Leader @ 9:09pm on 06/21/13

Event [20]Alert Started (5205), Status: [20]Alert Started, [REDACTED]

Event [07]Group Started (5205/36677), Status: [07]Group Started, MC5-[REDACTED]

Event [80]Send Started (5205/37204), Status: [80]Message issued, MC5-[REDACTED]

[REDACTED] responded at 9:12pm [REDACTED]

Child Fatality Team notified by email, [REDACTED]



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Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 5 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

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: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

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: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 06/21/2013

Assignment Date: 06/24/2013

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]	Lack of Supervision	[REDACTED]	[REDACTED]	*Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED] 07/05/2013
2	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	*Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED] 07/05/2013
3	[REDACTED]	[REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED]	*Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED] 07/05/2013

C. Disposition Decision

Disposition Decision:

Comments:

D. Case Workers

Case Worker: [REDACTED]

Date: 06/25/2013

Team Leader: [REDACTED]

Date: 06/25/2013

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:

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

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



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

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

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

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/14/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/19/2013

Completed date: 09/19/2013

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: 09/19/2013 02:55 PM Entered By: [REDACTED]

This case was presented to CPIT and the team agreed on the classification of unfounded. There was not any evidence to support the allegation.



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: 07/01/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 07/08/2013

Completed date: 07/08/2013

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: 07/08/2013 12:06 PM Entered By: [REDACTED]

CPSI [REDACTED] and Team Leader [REDACTED] made a home visit to engage the family about possible services. CPSI [REDACTED] and TL [REDACTED] were met by the paternal grandfather of [REDACTED]. He introduced himself as Mr. [REDACTED]. Mr. [REDACTED] stated the father has taken the children to the zoo and does not know when they will be home. He disclosed he did not see the purpose of DCS being involved because "these children are well taken care of." Mr. [REDACTED] stated the police have concluded the investigation into the accident and found this to be a "just that, a terrible accident." CPSI engaged Mr. [REDACTED] about the purpose of DCS involvement and this was to provide services if the family felt inclined. Mr. [REDACTED] said he would give the business cards to his son.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/22/2013

Contact Method: Attempted Face To Face

Contact Time: 12:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/25/2013

Completed date: 06/25/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact, Initial ACV Face To Face

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/25/2013 11:25 AM Entered By: [REDACTED]

CPSI [REDACTED] was instructed to check the obituaries to determine names, address, and other family information. There was only information regarding visitation and funeral arrangements.



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: 06/21/2013

Contact Method: Attempted Phone Call

Contact Time: 04:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/25/2013

Completed date: 06/25/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact, Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 06/25/2013 11:20 AM Entered By: [REDACTED]

CPSI [REDACTED] called Detective [REDACTED] in an effort to gather information about the family's names, address, etc. There was not an answer and a message was left.