



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 06/29/2013 12:18 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 06/29/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 07/01/2013 08:50 AM
First Team Leader Assigned: [REDACTED] Date/Time 07/01/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 07/01/2013 12:00 AM

Allegations

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

Notification: None

Narrative: TFACTS:

Family Case ID: None

Open Court Custody/FSS/FCIP None Found

Closed Court Custody None Found

Open CPS None Found

Fatality None Found

Indicated: None Found

Screened out None Found



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

History (not listed above): None Found

CM [REDACTED] completed a SSMS check and did not find any results that matched [REDACTED] or [REDACTED]

County: [REDACTED]

Notification: None

School/ Daycare: No

Native American Descent: No

Directions: None given

Reporters name/relationship: [REDACTED]

Reporter states: [REDACTED] (6 months old) resided with his parents, [REDACTED] and [REDACTED]. Law enforcement went to the home this morning, 6-29-2013, in regards to a report of a death of a child. When Law Enforcement arrived the infant was observed not breathing. Emergency medical personal were called and arrived to the home, however EMS did not perform any resuscitating measures because the infant was already deceased.

It was reported that at about 11:00 P.M. last night the infant was placed in the crib. An adult sheet was placed in the crib with the infant. It is believed that the infant may have wrapped himself in the sheet, suffocating himself. The infant was found unresponsive this morning at about 9:00 A.M. Both parents were at the home last night and this morning. Neither parent reports waking up and going to check on [REDACTED] throughout the night.

The infant has been transported to [REDACTED] for an autopsy.

It is believed that there are three other children living in the home, however the information for these children was not available at this time. The other children were home at the time of the incident. The parents were observed and appeared to be reacting appropriately.

The referent gave no indication that the parents are involved with drug use.

[REDACTED] did not have any reported special needs or disabilities.

Per SDM: Investigative Track, P1 - [REDACTED] [REDACTED] on 6-29-13 at 1:07 P.M.

[REDACTED] County paged at 1:07 P.M. Event [07]Group Started ([REDACTED]), Status: [07]Group Started,

[REDACTED] responded at 1:11 p.m. - CM [REDACTED]

Child Fatality Group and Child Fatality Notification EI DCS Group notified. Email sent to: [REDACTED]
[REDACTED]
[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: [REDACTED] Race: White Age: 0 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 28 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: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 27 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: Unknown Participant [REDACTED], Unknown

Gender: Date of Birth: Participant 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
Tennessee Child Abuse Hotline Summary**

Name: Unknown Participant [REDACTED], Unknown

Gender:

Date of Birth:

Participant 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:

Name: Unknown Participant [REDACTED], Unknown

Gender:

Date of Birth:

Participant 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: 06/29/2013

Assignment Date: 07/01/2013

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]			10/15/2013
2	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED]
					[REDACTED]			10/15/2013

C. Disposition Decision

Disposition Decision: Refer for Other Services and Close

Comments: Case closed as AUPU. Autopsy revealed accidental suffocation.

D. Case Workers

Case Worker: [REDACTED]

Date: 10/15/2013

Team Leader: [REDACTED]

Date: 10/16/2013

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:

Child is deceased and cannot give a statement.

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)?

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



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

The department became involved with this family on 6/29/13 due to an allegation of Neglect Death of 6 month old [REDACTED] by both birth parents. [REDACTED] was found face down tangled up in a sheet in his crib by his mother. This case is being closed as AUPU on both parents. The parents showed a poor choice of safe sleep which is against today's standards by having an adult size sheet, toys, stuffed animals and a small pillow in his crib, but it cannot be proven that they knew this was a safety hazard, especially after having 3 other boys they have raised/had sleep the same way and they turned out fine. CPIT agreed with this classification due to these same facts and there being no way to prove there was any purposeful neglect or abuse. The other boys are doing fine. This Cm offered to help the parents find a grief counselor if they want one and gave them a brochure about losing a child.

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: 10/16/2013 Contact Method:
 Contact Time: 04:20 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 10/16/2013
 Completed date: 10/16/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/16/2013 03:25 PM Entered By: [REDACTED]
 Date: 10/16/13
 Purpose: Case Review for Closure

TL [REDACTED] reviewed this case for closure. The following tasks were completed on the dates indicated and documented by TL as directed by the CPS Corrective Action Plan.

Date of Referral:6/29/13

Initial Notification to Juvenile Court:7/2/13
 Notification to DA: 7/2/13
 Law Enforcement Notification: 7/2/13
 CAC Notification: 7/2/13
 SDM Safety Assessment: 6/29/13
 FAST:na

CS-0740 Sent to Juvenile Court: 10/16/13



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:	10/15/2013	Contact Method:	
Contact Time:	10:30 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	10/15/2013
Completed date:	10/15/2013	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 10/15/2013 09:44 PM Entered By: [REDACTED]

The department became involved with this family on 6/29/13 due to an allegation of Neglect Death of 6 month old [REDACTED] by both birth parents. [REDACTED] was found face down tangled up in a sheet in his crib by his mother. This case is being closed as AUPU on both parents. The parents showed a poor choice of safe sleep which is against today's standards by having an adult size sheet, toys, stuffed animals and a small pillow in his crib, but it cannot be proven that they knew this was a safety hazard, especially after having 3 other boys they have raised/had sleep the same way and they turned out fine. CPIT agreed with this classification due to these same facts and there being no way to prove there was any purposeful neglect or abuse. The other boys are doing fine. This Cm offered to help the parents find a grief counselor if they want one and gave them a brochure about losing a child.

A copy of the 740 will be forwarded to the Juv. Court at the closing of this case per DCS 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: 10/11/2013

Contact Method: Face To Face

Contact Time: 11:02 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/11/2013

Completed date: 10/11/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/11/2013 10:18 AM Entered By: [REDACTED]

Case presentation to CPIT this date. Recommendation to classify case AUPU. Death was determined accidental due to suffocation from the bedding.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/11/2013

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/15/2013

Completed date: 10/15/2013

Completed By: [REDACTED]

Purpose(s): Permanency

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/15/2013 09:32 PM Entered By: [REDACTED]

There were problems emailing this Cm the file because of how large it was so this Cm asked that they just make a paper copy of the file for me and that I would swing by and pick it up.

This Cm arrived at the [REDACTED] P.D. at 8:45 am on 10/11/13 and the file had been photocopies and put in a manilla envelope for this Cm.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/09/2013

Contact Method: Face To Face

Contact Time: 10:40 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 10/09/2013

Completed date: 10/09/2013

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): ACV Interview/Observation, Collateral Contact

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/09/2013 03:17 PM Entered By: [REDACTED]

The case recording made this Cm add [REDACTED] as being there but he is DECEASED.

Cm [REDACTED] went by the home of the [REDACTED] family on 10/9/13 at 10:40 am. [REDACTED] father answered the door and said [REDACTED] was at work. This Cm asked if he was watching the children for her since it was Fall Break and he said yes. This Cm asked if it would be ok for this Cm to see the kids so this Cm could close the case out and he said that was fine and opened the door for this Cm to come inside. This Cm asked him where [REDACTED] was working and he said [REDACTED]. He said she works there partime. This Cm asked how she was doing and he said she is doing ok, getting a little better. This Cm asked about how the father was doing and he said "about the same". This Cm observed all 3 of the boys on the floor watching tv. The youngest had a bottle and was in his pajamas. The oldest 2 had a plate of waffles they were eating and they were in their boxers. This Cm did not observe any injuries on the children and they appeared to be clean. This Cm also noticed the home was as this Cm saw it last time which is lived in but not cluttered or dirty.

This Cm asked if he could just tell [REDACTED] that this Cm had to wait on the autopsy report to come in and it just did but this Cm had to see the kids one more time before closing the case out and that she can call me if she has any problems or questions. He said he would pass it on.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/08/2013

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/08/2013

Completed date: 10/08/2013

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/08/2013 01:49 PM Entered By: [REDACTED]

Cm [REDACTED] spoke with [REDACTED] with the [REDACTED] P.D. on 10/8/13 and he said he had just gotten the autopsy report today and would send this Cm a complete copy of the file.

Narrative Type: Addendum 1 Entry Date/Time: 10/15/2013 09:29 PM Entered By: [REDACTED]

This was mistakenly put under a Case Summary and should have been a Collateral Contact.



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: 09/25/2013

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/25/2013

Completed date: 09/25/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/25/2013 07:07 PM Entered By: [REDACTED]

On 9/25/13 Cm [REDACTED] tried to call and speak to [REDACTED] about the progress on the autopsy results and if I could get a copy of the police report and other paperwork she had on this case but her phone was not working so this Cm sent her an email asking the same thing.



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: 09/13/2013

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: 09/25/2013

Completed date: 09/25/2013

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: 09/25/2013 07:05 PM Entered By: [REDACTED]

CPIT was held on 9/13/13 for the [REDACTED] case. The team agreed to continue the case since we didn't have the [REDACTED] there and we don't have the autopsy results yet.



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:	07/15/2013	Contact Method:	Attempted Face To Face
Contact Time:	04:45 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	08/28/2013
Completed date:	08/28/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	ACV Interview/Observation, Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/28/2013 01:26 PM Entered By: [REDACTED]

Cm [REDACTED] went to the home of [REDACTED] on 7/15/13 at 4:45 pm to try and see the boys. [REDACTED] and the boys were swimming at her father's house this Cm was told by a family friend who answered the door. The friend said they should be back later tonight if this Cm wanted to stop back by so this Cm left him my name and number on a card and asked him to give that to [REDACTED] when she got home. He said he would put it on the table so he won't forget.

Narrative Type: Addendum 1 Entry Date/Time: 08/28/2013 01:27 PM Entered By: [REDACTED]

This Cm went back by the [REDACTED] home on 7/15/13 at 7:00 pm but was told by the same family friend they weren't home from swimming yet.



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: 07/02/2013

Contact Method: Correspondence

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/31/2013

Completed date: 07/31/2013

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: 07/31/2013 07:48 PM Entered By: [REDACTED]

Cm [REDACTED] convened CPIT on 7/2/13 at 9:00 am by faxing a copy of the referral without the referents information to the [REDACTED] Court and then scanning/emailing a full copy of the referral to TL [REDACTED] the CAC and the D.A.s office. This Cm also called [REDACTED] to let her know about the new case. She stated she would do some backgrounds and then get back with this Cm.



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:	
Contact Time:	08:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/31/2013
Completed date:	07/31/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 07/31/2013 07:47 PM Entered By: [REDACTED]

Cm [REDACTED] was notified on 7/1/13 that I had been assigned a P1, Neglect Death on a 6 month old met on call by Cm [REDACTED]

Referral is as follows:

Reporter states: [REDACTED] (6 months old) resided with his parents, [REDACTED] and [REDACTED]. Law enforcement went to the home this morning, 6-29-2013, in regards to a report of a death of a child. When Law Enforcement arrived the infant was observed not breathing. Emergency medical personnel were called and arrived to the home, however EMS did not perform any resuscitating measures because the infant was already deceased.

It was reported that at about 11:00 P.M. last night the infant was placed in the crib. An adult sheet was placed in the crib with the infant. It is believed that the infant may have wrapped himself in the sheet, suffocating himself. The infant was found unresponsive this morning at about 9:00 A.M. Both parents were at the home last night and this morning. Neither parent reports waking up and going to check on [REDACTED] throughout the night.

The infant has been transported to [REDACTED] for an autopsy.

It is believed that there are three other children living in the home, however the information for these children was not available at this time. The other children were home at the time of the incident. The parents were observed and appeared to be reacting appropriately.

The referent gave no indication that the parents are involved with 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: 06/29/2013 Contact Method: Face To Face
 Contact Time: 03:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 07/31/2013
 Completed date: 07/31/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact,Initial ACV Face To Face,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/31/2013 07:51 PM Entered By: [REDACTED]

CM [REDACTED] received a P1 investigation on 6/29/13 in regards to an Infant Neglect Death. CM spoke with responding officer who stated that he feels as though this was accidental and did not feel that the other children were in danger. The officer stated that he ran background checks on the parents and they have no history with law enforcement.
 CM [REDACTED] checked Tfacts on 6/29/13 at 3:00pm, no history was found on this family.

CM arrived at the [REDACTED] household on 6/29/13. CM spoke with the mother and father. The family was appropriate with their behavior. The mother, [REDACTED] stated that she had taken a twin size bed sheet and folded it over to fit the size of the crib and laid it on top of the child's boppy pillow. [REDACTED] reported that the reason she did this was to keep the child cooler due to the apartments air conditioning not working properly up stairs. [REDACTED] stated that around 9 am she went to get the child and he was blue and cold. [REDACTED] reported that is when she called 911. Law Enforcement responded to the call and in turn called EMS. When EMS arrived they did not perform resuscitating measures because the infant was already deceased.
 CM spoke with a collateral, maternal grandmother [REDACTED]. [REDACTED] stated that [REDACTED] and [REDACTED] are very good parents and is very appropriate with their children. [REDACTED] stated that they are extremely loving to their children.
 CM spoke with T/L on call, [REDACTED] and explained the situation to her. During the phone call CM explained that there are currently 3 other children in the home. The home was appropriate with no safety concerns. The parents appear to be appropriate with their behavior. CM explained that she had spoken with the responding officer as well as the maternal grandmother and also that the family has no criminal or DCS history. T/L [REDACTED] agreed with this CM that the other children are not in danger.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED] TN DCS Intake ID #: [REDACTED]
 County: [REDACTED] Worker:
 Date of Referral: 6/29/13 12:18 PM Date of Assessment: 6/29/13 12:00 AM
 Assessment Type: Initial Closing Other Number of Children in the Household: 4

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: _____