



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

**Intake**

Intake ID: [REDACTED]  
 Intake Taken By: [REDACTED] Intake Date/Time: 07/02/2013 04:01 PM CT  
 Track Assigned: Investigation Priority Assigned: 1  
 Screened By: [REDACTED]  
 Date Screened: 07/02/2013

**Investigation**

Investigation ID: [REDACTED]  
 First County/Region: [REDACTED]  
 Date/Time Assigned : 07/02/2013 06:38 PM  
 First Team Leader Assigned: [REDACTED] Date/Time 07/02/2013 12:00 AM  
 First Case Manager [REDACTED] Date/Time 07/02/2013 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	3 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:

Type of Contact: I-3 Phone

Notification: None

Narrative: TFACTS: No history found.

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Indicated No

Fatality No

Screened out 0

History (not listed above):



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

DUPLICATE REFERRAL: No

County: [REDACTED]  
 Notification: None  
 School/ Daycare: Unknown  
 Native American Descent: no  
 Directions: None given

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

Reporter states:

[REDACTED] (2) was residing with his mother, [REDACTED] in [REDACTED] County. His aunt, [REDACTED] and her boyfriend, [REDACTED] reside in the home, too.

It is unknown if the father, name unknown, resides in the home, too. No other children were reported to reside in the home.

[REDACTED] was found in the pool by his family this afternoon so they called 911. Law enforcement was dispatched to the home at 3:36pm ET. Upon arrival, [REDACTED] was unresponsive by the side of the pool. They tried to administer CPR to [REDACTED] but he was already in rigor according to law enforcements preliminary report. It is believed an autopsy will be performed, but it is unknown which hospital will be performing it.

[REDACTED] County DCS was notified at 3:45pm ET and are on scene currently. Therefore, they do not need to receive a page. [REDACTED] father (name unknown) was not in the home or present during the incident. He arrived to the sight afterwards where he passed out. He was taken to the hospital. His mother, [REDACTED] is on scene and is hysterical. None of the adults living in the home have been spoken with regarding what happened to [REDACTED]

The home is currently being observed by a DCS case manage and supervisor. The home does not have any hazards inside it. Moreover, the home is described as a nice home. The pool was their own private pool. It is unknown if the pool has a gate or was covered when [REDACTED] accessed it. DCS does not have any history on this family, and it is unknown if they have been involved previously with police.

Are special needs or disabilities known? No.

Notified Child Fatality Group:

CI [REDACTED] [REDACTED], [REDACTED]  
 [REDACTED]  
 [REDACTED]

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

Per SDM: Investigative Track, P1, [REDACTED], TL on 7-2-13 @ 4:29 pm



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

**Participant(s)**

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 24 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:

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:** [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN:

Race: White

Age: 3 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]

Partipant ID: [REDACTED]

SSN:

Race:

Age: 24 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  
Tennessee Child Abuse Hotline Summary**

**Name:** Unknown Participant [REDACTED] Unknown

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:**

**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: 07/02/2013

Assignment Date: 07/02/2013

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 Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 08/27/2013

**C. Disposition Decision**

Disposition Decision: Assessed and Closed

Comments: CM [REDACTED] investigated this case and found evidence to support the allegations of Neglect Death. [REDACTED] was found unresponsive in the family pool on 7/2/13. [REDACTED] was pronounced dead and [REDACTED] in [REDACTED]. No autopsy was performed however [REDACTED] examined [REDACTED] body. [REDACTED] determined that [REDACTED] had been dead for 1 to 3 hours. [REDACTED] mother was at the home and supposed to be supervising [REDACTED]. However [REDACTED] stated that she laid [REDACTED] down for a nap on an upstairs couch and then fell asleep herself on a downstairs couch. She stated that when she awoke that she could not find [REDACTED]. That her sister went out back and found him floating in the family pool. ADA [REDACTED] has expressed that she would not sign off on CPIT form without toxicology report that is not expected until Oct. 2013. However, this case was discussed with TL [REDACTED] and it was decided that this CM would go ahead and indicate the allegation.

**D. Case Workers**

Case Worker: [REDACTED]

Date: 08/27/2013

Team Leader: [REDACTED]

Date: 08/28/2013

**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:**

On 7/2/13 at approx. 3:45pm TL [REDACTED] received a phone call from Det. [REDACTED] with the [REDACTED] Police Dept, reporting that there had been a child death on this date. TL [REDACTED] assigned the case to CM [REDACTED] at that time. CM [REDACTED] and TL [REDACTED] arrived at [REDACTED] at approx. 4:20pm. At that time CM [REDACTED] and TL [REDACTED] spoke to [REDACTED] Chief of Police [REDACTED] and Det. [REDACTED]. Det. [REDACTED] reported to this CM and TL [REDACTED] that he had been called out on numerous occasions due to [REDACTED] locking her keys in her car and at least on one occasion that [REDACTED] was locked into the Also at the home were Officers [REDACTED] and [REDACTED] as well as the two EMTs. The family members present at the home at the time this CM arrived were: the Mother, [REDACTED], the Aunt, [REDACTED], and [REDACTED] Boyfriend, [REDACTED]. This CM immediately began taking photographs



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

Case Name : ██████████

Investigation ID: ██████████

of the child, the home, the pool, the door leading outside of the home to the pool, the upstairs, medication etc. This CM first spoke to ██████████ (10/10/88). ██████████ was very emotional and at times hysterical. This CM and LE were only able to get limited information for ██████████. ██████████ stated that she and ██████████ laid down on the couch in the upstairs den. The Den is an open den with stairs leading to the downstairs den. Also there is an overlook to the downstairs den. ██████████ stated that ██████████ likes to sleep in his toddler bed that was located in the upstairs den however ██████████ reported that both her and ██████████ were lying on the couch. She stated that when ██████████ had fallen asleep that she got up from the couch and went downstairs to the kitchen to make her something to eat. She stated that after eating that she laid down on the couch downstairs and fell asleep. She reported that the TV was on. ██████████ also reported that she had been sick the night before, she had been throwing up, and was very tired due to not getting enough sleep. At that time during the interview ██████████ began screaming and crying stating that it was her fault that she should not have fallen asleep. She also stated that she didn't understand how he could have gotten outside. This CM asked if she locked the door before going to sleep. ██████████ stated no. And then began to scream and cry again that it was her fault and that she just wanted her baby back. ██████████ submitted to a UDS. She was positive for Benzodiazepines And Suboxone. She reported that she has the following prescriptions: Effexor, Adderall, and Suboxone. ██████████ reported that she has been going to a Suboxone clinic for over two years. That she used to use drugs but that she got clean before having ██████████

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

No autopsy was performed however Dr. ██████████ examined ██████████ body. Dr. ██████████ determined that ██████████ had been dead for 1 to 3 hours. The toxicology report is still pending at this time.

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

██████████ stated that she awoke very early that morning before ██████████. That ██████████ got up and was getting ready for work. That she had to go pay the storage bill by 8am. That ██████████ left and she woke up ██████████. That she got ██████████ dressed but realized that she was running late to pay the bill and that ██████████ had forgotten to leave the money to pay the bill so she stated that she put their comfortable clothes back on. She stated that her and ██████████ eat breakfast and played out back for a while. She stated that she didn't remember if she spoke to ██████████ or not. Then she stated that she spoke to ██████████ before ██████████ got up. She stated that she fixed ██████████ a PB&J sandwich but he didn't eat it and then she stated that she laid down with ██████████ up stairs on the couch in the loft. That she put a scooby doo movie on. She stated that he went to sleep really fast. That when he was asleep that she went back down stairs and laid down on the downstairs couch and fell asleep maybe around 2pm. She stated that she hadn't felt good and that it was really unusual for her to lay down on the couch down stairs. She stated that when she awoke that ██████████ and ██████████ were down in the kitchen. That she went outside to smoke and when she walked out back and closed the patio door that it immediately hit her that she did not have to unlock the door. She stated that she went back in the home and asked ██████████ and ██████████ where ██████████ was. ██████████ and ██████████ stated that they thought ██████████ was at ██████████ house. ██████████ stated that she ran up stairs and ██████████ was not on the couch. She stated that she ran back down stairs and outside to the back pool and that's when she saw ██████████ and ██████████ at the pool. ██████████ got in the pool and got ██████████ out of the pool, then handed him to ██████████ and then ██████████ handed ██████████ to ██████████. ██████████ stated that she took him in the house and laid in on the floor in the living room. She stated that she began giving him CPR. That the police showed up and took over giving him CPR.

██████████ stated that she does take Suboxone 8mg two strips a day. She stated that she will take one strip and then 15 mins later will take the other strip.

██████████ reported that she also takes Adderol 30mg x2- morning and afternoon depending on when she has school. ██████████ reported that she also takes effexor- 150mg at night.

██████████ reported that she did not take her Adderol but did take her suboxone that day. She stated that she



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

Case Name : ██████████

Investigation ID: ██████████

could not remember when she took it though.

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

None at this time.

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

This CM then spoke to ██████████ (DOB ██████████). ██████████ reported that she got up at around 10am to eat breakfast. She stated that ██████████ was asleep on the couch in the upstairs den. That after eating she went back to her bedroom and remained in her bedroom for the rest of the day, playing video games on the computer. ██████████ reported that about 3:15pm that she went to take a shower in the downstairs bathroom. That when she came out of her bedroom that ██████████ was not on the couch upstairs, and that her sister was on the couch downstairs sleeping. ██████████ reported that she thought that ██████████ was at ██████████ house (Paternal grandmother). ██████████ stated that when she came out of the bathroom that she sister had just woken up, probably by the TV. She stated that ██████████ asked her where ██████████ was. ██████████ stated that she thought ██████████ was at ██████████. ██████████ stated that ██████████ told her no that ██████████ was there. ██████████ stated that ██████████ ran upstairs to try and find ██████████. ██████████ then stated that they checked in garage. ██████████ then stated that she went out the back door to the pool. ██████████ stated that the back door was unlocked when she went out the door. (The back door has two locks. One lock is on the door knob, however that lock is broken. The second lock is located at the top of the door and it is a sliding bar lock.) ██████████ stated that when she walked up to the pool that she saw ██████████ floating face down in the shallow end of the pool underneath a float. She stated that she got him out of the pool and brought him into the house and called 911. She reported that ██████████ began giving ██████████ CPR and then the police arrived. ██████████ submitted to a UDS. ██████████ tested positive for Benzodiazepines. ██████████ reported that she has prescriptions for Lexapro, Xanax, and birth control (orthotricyclin).

This CM then spoke to ██████████ (DOB ██████████). ██████████ reported that he was asleep and or playing video games in ██████████ bedroom all day except for around 12pm he came out to the kitchen to get a pop tart to eat. He stated that he did not see ██████████. He stated that he thought ██████████ was at ██████████ house. She stated that when he went into the kitchen that he noticed that ██████████ was out on the back porch patio passed out in the chair with a cigarette in her hand. He stated that he didnt even realize that ██████████ was there until ██████████ found him in the pool and brought him into the house. ██████████ submitted to a UDS. ██████████ tested positive for PCP. However ██████████ reported that he had been sick with a cold and had been taking a lot of Nyquil. ██████████ reported that he is not on any prescription medications. The father, ██████████ and paternal grandfather, ██████████ both arrived at the home. However ██████████ passed out and was being treated on the scene for some time. The parental grandfather was tending to his son.

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: 08/27/2013

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/27/2013

Completed date: 08/27/2013

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: 08/27/2013 04:12 PM      Entered By: [REDACTED]

Indication Notification

Notification of Indication letter sent on 8/28/13 to [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: 08/27/2013

Contact Method:

Contact Time: 03:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/27/2013

Completed date: 08/27/2013

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: 08/27/2013 03:03 PM Entered By: [REDACTED]

CM [REDACTED] investigated this case and found evidence to support the allegations of Neglect Death. [REDACTED] was found unresponsive in the family pool on 7/2/13. [REDACTED] was pronounced dead and [REDACTED] in [REDACTED]. No autopsy was performed however Dr. [REDACTED] examined [REDACTED] body. Dr. [REDACTED] determined that [REDACTED] had been dead for 1 to 3 hours. [REDACTED] mother was at the home and supposed to be supervising [REDACTED]. However [REDACTED] stated that she laid [REDACTED] down for a nap on an upstairs couch and then fell asleep herself on a downstairs couch. She stated that when she awoke that she could not find [REDACTED]. That her sister went out back and found him floating in the family pool. ADA [REDACTED] has expressed that she would not sign off on CPIT form without toxicology report that is not expected until Oct. 2013. However, this case was discussed with TL [REDACTED] and it was decided that this CM would go ahead and indicate the allegation and if the toxicology reports something more involved, ie drugs in child's system, it can be reviewed at the time.



**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: 08/26/2013

Contact Method:

Contact Time: 03:35 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/26/2013

Completed date: 08/26/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/26/2013 02:45 PM Entered By: [REDACTED]

TL [REDACTED] staffed with CM [REDACTED]. Child is deceased and there are no other children in the home. CM discussed support services with family. Mother was already seeing a psychiatrist, both for medication and she reported counseling as well. No other services were needed and the family was financially able to met funeral costs, etc.

Allegation is Neglect Death. ADA [REDACTED] has expressed that she would not sign off on CPIT form without toxicology report that is not expected until Oct. 2013. However, we discussed we can go ahead and indicate and if the toxicology reports something more involved, ie drugs in child's system, it can be reviewed at the time.

Case approved to be indicated and closed and CPIT form to be completed at a later date.



**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: 08/19/2013

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/19/2013

Completed date: 08/19/2013

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: 08/19/2013 07:05 AM Entered By: [REDACTED]

The ACV in this case, [REDACTED] [REDACTED] is deceased. This case will remain open until the toxicology report on [REDACTED] comes in from the [REDACTED] Chief of Police [REDACTED] will notify CPIT and this CM when the results come in. They are expected back in Oct. 2013. At that time this case will be presented to CPIT and closed.



**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: 08/12/2013

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/12/2013

Completed date: 08/19/2013

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: 08/12/2013 07:40 AM Entered By: [REDACTED]

CM [REDACTED] requested that this investigation be extended and kept open until Oct 2013 to wait for the results of [REDACTED] toxicology report from the [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: 07/24/2013

Contact Method: Face To Face

Contact Time: 09:30 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/24/2013

Completed date: 08/12/2013

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: 07/24/2013 11:41 AM Entered By: [REDACTED]

**CPIT Meeting**

This Case was presented to the [REDACTED]. CPIT on this date.

The following decision was made: This case will be brought back at a later date due to [REDACTED] Toxicology report will not be back from the [REDACTED] until Oct. 2013.

Narrative Type: Addendum 1 Entry Date/Time: 08/19/2013 08:07 AM Entered By: [REDACTED]

It was reported by [REDACTED] that the medical examiner, Dr. [REDACTED] at [REDACTED] reported that [REDACTED] had been dead for between 1 and 3 hours. [REDACTED] [REDACTED] also reported that the pool water was 85 degrees when checked on the day of [REDACTED] death.



**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: 07/22/2013

Contact Method: Phone Call

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/22/2013

Completed date: 08/12/2013

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: 07/22/2013 01:52 PM      Entered By: [REDACTED]

CM [REDACTED] spoke to [REDACTED] ( [REDACTED] ) at [REDACTED] [REDACTED] the company that supplies DCS's UDS. This CM asked if Effexor would show up as a Benzo. He stated that typically Effexor does not show up as a benzo however it could show up as a false positive for benzo due to the mixture of Effexor and Subutex.



**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: System Completed  
 Contact Date: 07/22/2013 Contact Method: Face To Face  
 Contact Time: 10:00 AM Contact Duration: Less than 04 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Community Site Created Date: 07/22/2013  
 Completed date: 08/22/2013 Completed By: System Completed  
 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: 07/22/2013 01:21 PM Entered By: [REDACTED]

CM [REDACTED] and [REDACTED] Police chief [REDACTED] met with and interviewed the following people on this date at the [REDACTED] Police Department.  
 [REDACTED] (birth mother)

[REDACTED] stated that she awoke very early that morning before [REDACTED]. That [REDACTED] got up and was getting ready for work. That she had to go pay the storage bill by 8am. That [REDACTED] left and she woke up [REDACTED]. That she got [REDACTED] dressed but realized that she was running late to pay the bill and that [REDACTED] had forgotten to leave the money to pay the bill so she stated that she put their comfortable clothes back on. She stated that her and [REDACTED] eat breakfast and played out back for a while. She stated that she didn't remember if she spoke to [REDACTED] or not. Then she stated that she spoke to [REDACTED] before [REDACTED] got up. She stated that she fixed [REDACTED] a PB&J sandwich but he didn't eat it and then she stated that she laid down with [REDACTED] up stairs on the couch in the loft. That she put a scooby doo movie on. She stated that he went to sleep really fast. That when he was asleep that she went back down stairs and laid down on the downstairs couch and fell asleep maybe around 2pm. She stated that she hadn't felt good and that it was really unusual for her to lay down on the couch down stairs. She stated that when she awoke that [REDACTED] and [REDACTED] were down in the kitchen. That she went outside to smoke and when she walked out back and closed the patio door that it immediately hit her that she did not have to unlock the door. She stated that she went back in the home and asked [REDACTED] and [REDACTED] where [REDACTED] was. [REDACTED] and [REDACTED] stated that they thought [REDACTED] was at [REDACTED] house. [REDACTED] stated that she ran up stairs and [REDACTED] was not on the couch. She stated that she ran back down stairs and outside to the back pool and that's when she saw [REDACTED] and Justin at the pool. [REDACTED] got in the pool and got [REDACTED] out of the pool, then handed him to [REDACTED] and then [REDACTED] handed [REDACTED] to [REDACTED]. [REDACTED] stated that she took him in the house and laid in on the floor in the living room. She stated that she began giving him CPR. That the police showed up and took over giving him CPR.

[REDACTED] stated that she does take Suboxone 8mg two strips a day. She stated that she will take one strip and then 15 mins later will take the other strip.

[REDACTED] reported that she also takes Adderol 30mg x2- morning and afternoon depending on when she has school.

[REDACTED] reported that she also takes effxor- 150mg at night.

[REDACTED] reported that she did not take her Adderol but did take her suboxone that day. She stated that she could not



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

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Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

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remember when she took it though.



**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: 07/19/2013 Contact Method: Face To Face  
 Contact Time: 11:30 AM Contact Duration: More than 5 Hours  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Community Site Created Date: 07/22/2013  
 Completed date: 08/12/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact,Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/22/2013 01:17 PM Entered By: [REDACTED]

CM [REDACTED] and [REDACTED] Police [REDACTED] met with and interviewed the following people on this date at the [REDACTED] Police Department.

[REDACTED] and [REDACTED]: [REDACTED] paternal grandparents.  
 [REDACTED] and [REDACTED]: [REDACTED] maternal grandparents.  
 [REDACTED] Aunt's boyfriend  
 [REDACTED]: Father

Narrative Type: Addendum 1 Entry Date/Time: 08/23/2013 12:07 PM Entered By: [REDACTED]

7/19/13 at 11am

[REDACTED] DOB [REDACTED] stated that he was [REDACTED] paternal grandfather. That [REDACTED] and [REDACTED] had been together about 3-5 years. About 2years before [REDACTED] was born. That [REDACTED] works at [REDACTED] main office near [REDACTED] in [REDACTED]. That he and [REDACTED] did have an apartment behind [REDACTED], but lost the apartment due to financial difficulties. That when [REDACTED] was in [REDACTED] high school that she got ridiculed really bad. That [REDACTED] (his wife) had surgery on 6/26/13. That [REDACTED] was afraid to keep [REDACTED] by herself due to having her neck surgery and still healing from that. That he got off from work and home at about 3:30pm on that day and when they received the phone call that [REDACTED] passed out, that they drove immediately over to the home.

7/19/13 11:30am

[REDACTED] DOB [REDACTED] stated that she works at [REDACTED] Sub for driving buses as needed. That [REDACTED] and [REDACTED] had been together about 4 ½ years. That they lived at the [REDACTED] home until [REDACTED] was about 4/5 months pregnant then they moved into apartment behind [REDACTED]. After Christmas 2012 they lost their apartment due to financial reasons. That [REDACTED] just got a better paying job with [REDACTED]. That she and her husband had [REDACTED] every Sat. night so that they could take him to Church on Sunday mornings. That [REDACTED] takes suboxone, that [REDACTED] did have a drug problem (maybe oxycotin) but that she had been clean for almost 6 years. That she thinks [REDACTED] has been on Suboxone since [REDACTED] and her got together. [REDACTED] stated that she had been in the [REDACTED] house on occasion however she has never noticed signs



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

about locking the door posted in the house. [REDACTED] reported that [REDACTED] would normally take naps around 1-2pm and that he would sleep 1 to 3 hours.

[REDACTED] DOB [REDACTED] [REDACTED] reported that She, her boyfriend [REDACTED] and [REDACTED] were at the home. That [REDACTED] had left for work early that morning. That [REDACTED] and [REDACTED] went to sleep the night before on the sofa in the upstairs loft. That they were watching Scooby doo. That [REDACTED] would go to bed around 10:30pm or 11pm. That he would get up usually around 9 or 9 am but sometimes would sleep until 10 or 10:30 am. That she awoke around 10am that morning. That she and [REDACTED] ate breakfast and talked that morning. That she went back to her bedroom around 10:45am and that [REDACTED] was still asleep on the couch. [REDACTED] stated that she stay in her room the rest of the day until about 3pm. She stated that she went downstairs to take a shower and get ready for work. That [REDACTED] was asleep on the downstairs couch. That [REDACTED] came downstairs. That she and [REDACTED] were in the Kitchen and she was putting on her makeup and taking to [REDACTED] [REDACTED] stated that [REDACTED] was tired but that she was use to operating on very little sleep and could go without sleep for long periods of time. That [REDACTED] would only sleep when [REDACTED] was asleep or napping. That [REDACTED] was a very loud child. That locking the door was a team effort. That [REDACTED] usually smokes on the back porch and front porch. That [REDACTED] usually would watch TV while [REDACTED] smoked, that [REDACTED] would try to keep the smoke away from him. That her parents left the residence early Monday morning (about 3am) to go to [REDACTED] to visit family.

7/19/13

[REDACTED] (DOB [REDACTED]) and [REDACTED] (DOB [REDACTED]) [REDACTED]

That [REDACTED] has been on Suboxone for about 3 years due to pain pill drug addiction. That she has been clean for about 5 years. That she also takes Effexor for Depression and Aderaol for ADD. That she is attending nursing school at [REDACTED] College. That she started [REDACTED] when they moved here from [REDACTED] but then went to [REDACTED] High School. That [REDACTED] was afraid of the water and would not go near the water or pool unless someone was in the pool and holding their arms out to hold him. That they had just opened the pool up about two weeks prior and that they had put the signs up in the home when they opened the pool to remind people to lock the door.

7/19/13 3pm

[REDACTED] DOB [REDACTED] reported that he was really sick on that day. That he had taken a lot of Nyquil. That he went to bed around 11pm the night before. That the next day he woke up around 11:30am or 12pm and went down stairs to get a pop tart to eat. That [REDACTED] was outside smioking on the back patio. That she was sitting on a chair with her back to him that he did not see or hear [REDACTED] That he went back upstairs after that and did not come back down until around 3pm or so when [REDACTED] was getting ready for work.

7/19/13 at 3:30Pm

[REDACTED] DOB [REDACTED] On the night before He and [REDACTED] laid down on the couch in the loft upstairs and [REDACTED] stayed up taking pictures of bugs. About 1:30am [REDACTED] report that he went to get his phone from [REDACTED] and [REDACTED] was still awake. That he has to leave at 7:30am to get to work on time. That he was running late that morning. That he went back in because he felt like he left something, that he kissed [REDACTED] and covered him up and then left for work. That [REDACTED] was up and going to pay a storage bill at 8am. That they moved in with [REDACTED] parents back after Christmas 2012 due to financial difficulties. That [REDACTED] is prescribed Suboxone and has been on it ever since they have been together. That she used to have a drug problem with pills (oxys and roxys). That they were not together when [REDACTED] went to rehab. That [REDACTED] and [REDACTED] would take naps together during the day and that [REDACTED] would take long naps.



**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: System Completed  
 Contact Date: 07/02/2013 Contact Method: Face To Face  
 Contact Time: 04:30 PM Contact Duration: Less than 02 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Family Home Created Date: 07/02/2013  
 Completed date: 08/02/2013 Completed By: System Completed  
 Purpose(s):  
 Contact Type(s): 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: 07/03/2013 07:23 AM Entered By: [REDACTED]

On 7/2/13 at approx. 3:45pm TL [REDACTED] received a phone call from Det. [REDACTED] with the [REDACTED] Dept, reporting that there had been a child death on this date. TL [REDACTED] assigned the case to CM [REDACTED] at that time. CM [REDACTED] and TL [REDACTED] arrived at [REDACTED] at approx. 4:20pm. At that time CM [REDACTED] and TL [REDACTED] spoke to [REDACTED] Chief of Police [REDACTED] and Det. [REDACTED]. Det. [REDACTED] reported to this CM and TL [REDACTED] that he had been called out on numerous occasions due to [REDACTED] locking her keys in her car and at least on one occasion that [REDACTED] was locked into the Also at the home were Officers [REDACTED] and [REDACTED] as well as the two EMTs. The family members present at the home at the time this CM arrived were: the Mother, [REDACTED], the Aunt, [REDACTED] and [REDACTED]. This CM immediately began taking photographs of the child, the home, the pool, the door leading outside of the home to the pool, the upstairs, medication etc. This CM first spoke to [REDACTED] (10/10/88). [REDACTED] was very emotional and at times hysterical. This CM and LE were only able to get limited information for [REDACTED] stated that she and [REDACTED] laid down on the couch in the upstairs den. The Den is an open den with stairs leading to the downstairs den. Also there is an overlook to the downstairs den. [REDACTED] stated that [REDACTED] likes to sleep in his toddler bed that was located in the upstairs den however [REDACTED] reported that both her and [REDACTED] were lying on the couch. She stated that when [REDACTED] had fallen asleep that she got up from the couch and went downstairs to the kitchen to make her something to eat. She stated that after eating that she laid down on the couch downstairs and fell asleep. She reported that the TV was on. [REDACTED] also reported that she had been sick the night before, she had been throwing up, and was very tired due to not getting enough sleep. At that time during the interview [REDACTED] began screaming and crying stating that it was her fault that she should not have fallen asleep. She also stated that she didnt understand how he could have gotten outside. This CM asked if she locked the door before going to sleep. [REDACTED] stated no. And then began to scream and cry again that it was her fault and that she just wanted her baby back. [REDACTED] submitted to a UDS. She was positive for Benzodiazepines And Suboxone She reported that she has the following prescriptions: Effexor, Adderall, and Suboxone. [REDACTED] reported that she has been going to a Suboxone clinic for over two years. That she used to use drugs but that she got clean before having [REDACTED] This CM then spoke to [REDACTED] (DOB 3/17/89). [REDACTED] reported that she got up at around 10am to eat breakfast. She stated that [REDACTED] was asleep on the couch in the upstairs den. That after eating she went back to



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

her bedroom and remained in her bedroom for the rest of the day, playing video games on the computer. [REDACTED] reported that about 3:15pm that she went to take a shower in the downstairs bathroom. That when she came out of her bedroom that [REDACTED] was not on the couch upstairs, and that her sister was on the couch downstairs sleeping. [REDACTED] reported that she thought that [REDACTED] was at [REDACTED] house (Paternal grandmother). [REDACTED] stated that when she came out of the bathroom that she sister had just woken up, probably by the TV. She stated that [REDACTED] asked her where [REDACTED] was. [REDACTED] stated that she thought [REDACTED] was at [REDACTED] [REDACTED] stated that [REDACTED] told her no that [REDACTED] was there. [REDACTED] stated that [REDACTED] ran upstairs to try and find [REDACTED] [REDACTED] then stated that they checked in garage. [REDACTED] then stated that she went out the back door to the pool. [REDACTED] stated that the back door was unlocked when she went out the door. (The back door has two locks. One lock is on the door knob, however that lock is broken. The second lock is located at the top of the door and it is a sliding bar lock.) [REDACTED] stated that when she walked up to the pool that she saw [REDACTED] floating face down in the shallow end of the pool underneath a float. She stated that she got him out of the pool and brought him into the house and called 911. She reported that [REDACTED] began giving [REDACTED] CPR and then the police arrived. [REDACTED] [REDACTED] submitted to a UDS. [REDACTED] tested positive for Benzodiazepines. [REDACTED] reported that she has prescriptions for Lexapro, Xanax, and birth control (orthotricyclin). This CM then spoke to [REDACTED] (DOB [REDACTED] . [REDACTED] reported that he was asleep and or playing video games in [REDACTED] bedroom all day except for around 12pm he came out to the kitchen to get a pop tart to eat. He stated that he did not see [REDACTED] He stated that he thought [REDACTED] was at [REDACTED] house. She stated that when he went into the kitchen that he noticed that [REDACTED] was out on the back porch patio passed out in the chair with a cigarette in her hand. He stated that he didnt even realize that [REDACTED] was there until [REDACTED] found him in the pool and brought him into the house. [REDACTED] submitted to a UDS. [REDACTED] tested positive for PCP. However [REDACTED] reported that he had been sick with a cold and had been taking a lot of Nyquil. [REDACTED] reported that he is not on any prescription medications. The father, [REDACTED], and paternal grandfather, [REDACTED] both arrived at the home. However [REDACTED] passed out and was being treated on the scene for some time. The parental grandfather was tending to his son. This CM was not able to question either one, However LE was able to speak with both the grandfather and father. The grandfather later took the father to the [REDACTED] ER to be checked out as well as to be given a blood drug screen. [REDACTED] made every attempt to complete a UDS however he was not able to produce any urine for the drug screen. [REDACTED] [REDACTED] was also taken to the ER to be treated for suicidal ideations and being distraught.



**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:	System Completed
Contact Date:	07/02/2013	Contact Method:	
Contact Time:	04:15 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/02/2013
Completed date:	08/02/2013	Completed By:	System Completed
Purpose(s):			
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 07/02/2013 07:53 PM      Entered By: [REDACTED]  
 TL [REDACTED] contacted TC [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: System Completed

Contact Date: 07/02/2013 Contact Method: Phone Call

Contact Time: 04:05 PM Contact Duration: Less than 15

Entered By: [REDACTED] Recorded For:

Location: Created Date: 07/02/2013

Completed date: 08/02/2013 Completed By: System Completed

Purpose(s):

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/02/2013 07:50 PM Entered By: [REDACTED]

TL [REDACTED] convened CPIT by speaking with Det. [REDACTED] with the [REDACTED] Police Department.



**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: System Completed  
 Contact Date: 07/02/2013 Contact Method:  
 Contact Time: 04:00 PM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 07/02/2013  
 Completed date: 08/02/2013 Completed By: System Completed  
 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: 07/02/2013 07:42 PM Entered By: [REDACTED]

CM [REDACTED] was assigned the below case on this date.

Cm [REDACTED] reviewed DCS history on the [REDACTED] family, however there is no past DCS history on the family.



# Family Functional Assessment

Case Name: \_\_\_\_\_ Case ID: \_\_\_\_\_  
 Primary Case Worker: \_\_\_\_\_ Begin Date: 07/30/2013  
 Last Review By: \_\_\_\_\_ Last Review Date: \_\_\_\_\_

**I. Current Circumstances:**

A. Reason For Involvement:

B. Family Story:

**II. Assessment of Family Strengths and Needs/Risks:**

A. Family Significant Strengths:

B. Family Significant Needs/Risks/Concerns:

**III. Person Information:**

A. Children:

B. Adults:

C. Family Together History:

D. Other Significant Relationships:

E. Legal/Court/DCS History:

Intake ID	Decision Date / Time	Intake Type	Investigation ID/ Assessment ID
██████████		CPS	██████████

  

Action Date	Action Category	Action Type	Court Docket #	Action Concerning	Additional Info

**IV. Assessment of Safety:**

07/30/2013 - ██████████ - Safety - ██████████ - ██████████  
 ██████████ was found by relatives drowned in a pool in his maternal grandparents' backyard. Dr. ██████████ at ██████████  
 ██████████ in ██████████ reported that the body showed no signs of foul play however ██████████ body was in the  
 pool for 1 to 3 hours. Present in the home during the time of death were: mother, ██████████  
 and ██████████

**V. Assessment of Well Being:**

**VI. Assessment of Permanence:**

**VII. Assessment of Resources:**

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
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\_\_\_\_\_  
*Worker's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Supervisor's Signature*

\_\_\_\_\_  
*Date*



**Tennessee Department of Children's Services**  
**SDM™ Safety Assessment**

**Assessment**

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 7/2/13 4:01 PM

Date of Assessment: 7/2/13 12:00 AM

Assessment Type:  Initial  Closing  Other

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): Child is deceased. There are no other children.

#### 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:** \_\_\_\_\_