



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 08/16/2013 11:22 AM CT
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 08/18/2013

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 08/19/2013 11:39 AM
 First Team Leader Assigned: [REDACTED] Date/Time 08/19/2013 12:00 AM
 First Case Manager [REDACTED] Date/Time 08/19/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED] Unknown	0 Yrs	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	Other 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: Note: This information is from the original intake, # [REDACTED] This is a Child Near Death that has now turned into a Child Death. The date and time of this intake was changed to reflect the original date and time of the initial intake.

This child is not currently in DCS Custody.

TFACTS: None found with the information provided

Open Court Custody/FSS/FCIP No
 Closed Court Custody No
 Open CPS - No
 Indicated None
 Fatality No
 Screened out None



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

History (not listed above): None

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

Reporters name/relationship: Deputy [REDACTED] Sheriffs Department

Note: This child is not currently in DCS Custody.

Reporter states:

[REDACTED] is the mother of an unknown female infant, approximately 8 weeks old. Today (8/16/13), law enforcement responded to a call at the home of [REDACTED] due to the infant not breathing. [REDACTED] is a family friend and a babysitter to the child. [REDACTED] told law enforcement that she found the infant limp and not breathing in her crib. The infants lips were reported to be blue in color at the time that [REDACTED] found the infant unresponsive. [REDACTED] immediately upon finding the infant unresponsive contacted 911.

When 911 responded, it was noted that the infant still was not breathing and CPR was performed. The infant was still reported to be non-responsive. Law enforcement is currently on scene, but the child has been transported to [REDACTED] and will likely be life-flighted to [REDACTED]. There is no known injuries to the child. [REDACTED] is currently being interviewed and has no explanation as to what happened earlier today.

[REDACTED] was contacted by [REDACTED] and arrived shortly after 911 arrived on scene. It is unknown if the infant has responded at this time. Detectives are still speaking with [REDACTED]. It is noted that [REDACTED] does have another child in her care that is reported to be her own 5 months old, name unknown. There are no current concerns with the 5 month old.

This is all the information known at this time. Law enforcement is requesting immediate assistance from the Tennessee Department of Children's Services. The officer that will be the contact with the Sheriffs department is Detective [REDACTED] at the number provided for the referent.

Note: Contact information for the mother of the infant is unknown at this time. The address provided in this intake is for [REDACTED]

Note: It is unknown at the time of the report if the child has a pulse or not. The referent could not state whether or not the child is alive or deceased at this time. As a result, this intake is being treated as a Child Near Death until further information is discovered.

Per SDM: Investigation Track P1 - Child Near Death
[REDACTED] TC, on 8/16/13 @ 11:58am

Notified Child Death/Child Near Death Notification Group via Email:

[REDACTED]

Per SDM: Investigation Track P1 - Child Death
[REDACTED], CM 3 on 8/18/2013 at 7:19 A.M.



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

[REDACTED] County paged at 7:19 A.M.
CM [REDACTED] responded at 7:21 A.M.

Notified Child Death/Child Near Death Notification Group via Email:

[REDACTED]



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

Participant(s)

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:

Name: [REDACTED], Unknown

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 0 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: [REDACTED]

Gender: Female

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

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:

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: 08/16/2013

Assignment Date: 08/19/2013

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	Classified Date			
1	[REDACTED]	[REDACTED]	Neglect Death	Unknown, Unknown [REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 09/04/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: The infant's death does not appear to be caused intentionally or by foul play.

D. Case Workers

Case Worker: [REDACTED]

Date: 09/04/2013

Team Leader: [REDACTED]

Date: 09/04/2013

E. Investigation Summary

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

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

CPSI/A [REDACTED] made face to face contact with the infant on 8/16/2013 at [REDACTED] Hospital. The photographs show the infant hooked to multiple machines with various IVs and tubes. CPSA/I [REDACTED] did not conduct an interview with the parents on this day.

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)?

Det. [REDACTED] of [REDACTED] County Sheriffs Department conducted an interview with the babysitter [REDACTED]. Ms. [REDACTED] reported that she had put the infant down for nap on her stomach in the crib. Ms. [REDACTED] went to check on the infant and found her unresponsive. The infant was taken by ambulance to [REDACTED] medical Center, then life flighted to [REDACTED] Hospital.



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:

Det. [REDACTED] of [REDACTED] County Sheriffs Department conducted an interview with the babysitter [REDACTED]. Ms. [REDACTED] reported that she had put the infant down for nap on her stomach in the crib. Ms. [REDACTED] went to check on the infant and found her unresponsive. The infant was taken by ambulance to [REDACTED] medical Center, then life flighted to [REDACTED] Hospital.

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

The case was presented to CPIT on 9/4/2013. The allegations of lack of supervision and neglect death are classified as AUPU (allegation unfounded perpetrator unfounded based on evidence thus far. The final autopsy results will not be available for some time. This complete process could take 6-8 month.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/04/2013 Contact Method:
 Contact Time: 04:25 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/04/2013
 Completed date: 09/04/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Case Summary
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/04/2013 04:30 PM Entered By: [REDACTED]

Closing Case Summary
Safety, Permanence, Well-being

CPSI [REDACTED] received an investigation on 8/16/2013 with allegations of lack of supervision. This case was screened as a near fatality as the 2 month infant had been found unresponsive at the babysitters home and was revived by paramedics. The infant was identified as [REDACTED]. CPSI [REDACTED] was contacted by Central intake on 8/18/2013 at 7:19 AM with notification that investigation had changed to an allegation of Neglect Death. The child fatality/near fatality team had been notified by Central intake Supervisor via email on 8/16/2013 and 8/18/2013. Det. [REDACTED] of [REDACTED] County Sheriffs Department conducted an interview with the babysitter [REDACTED]. Ms. [REDACTED] reported that she had put the infant down for nap on her stomach in the crib. Ms. [REDACTED] went to check on the infant and found her unresponsive. The infant was taken by ambulance to [REDACTED] medical Center, then life flighted to [REDACTED] Hospital. CPSI/A [REDACTED] made face to face contact with the infant on 8/16/2013 at [REDACTED] Hospital. The photographs show the infant hooked to multiple machines with various IVs and tubes. CPSA/I [REDACTED] did not conduct an interview with the parents on this day.

The case was presented to CPIT on 9/4/2013. The allegations of lack of supervision and neglect death are classfied as AUPU (allegation unfounded perpetrator unfounded based on evidence thus far. The final autopsy results will not be available for some time. This complete process could take 6-8 month.

Documentation of Closing SDM

Safety, Permanence, Well-being

Child Protective Services Investigator CPSI [REDACTED] assessed the safety in the home by completing the closing Safety Assessment. Based on currently available information, there are no children likely to be in immediate danger of serious harm.

There is no safety concerns observed at this time. The CLOSING SDM is scored as safe. The SDM was routed to TL [REDACTED] in TFACTS for approval



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

A copy of the 740 was sent to the Judge. A copy of the 740 was sent to the DA.



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: 09/04/2013

Contact Method: Face To Face

Contact Time: 10:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/04/2013

Completed date: 09/04/2013

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: 09/04/2013 01:41 PM Entered By: [REDACTED]

CPIT STAFFING

CPSI [REDACTED] presented this case to CPIT with the assistance of TL [REDACTED] and Det. [REDACTED] providing information that they gathered on the investigation. The allegation was classified as AUPU against an unknown perpetrator. The team was in agreement of this classification based on the evidence so far. The detective reported that at this time there is no evidence of abuse or neglect being a contributing cause of death. The form was completed and located in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/20/2013	Contact Method:	Correspondence
Contact Time:	09:20 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	Detention/Jail	Created Date:	08/20/2013
Completed date:	08/20/2013	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: 08/20/2013 11:33 AM Entered By: [REDACTED]

CPSI [REDACTED] traveled to [REDACTED] County Sheriff's Department to speak with Det. [REDACTED] and to pick up the police/incident report on the [REDACTED] Near Fatality/Fatality. Det. [REDACTED] was in another meeting when the worker arrived, but the requested documents were provided to the worker.

NEXT STEP: CPSI [REDACTED] will scan the documents into TFACTS after a review of the content.



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: 11:39 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/04/2013
 Completed date: 09/04/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Case Summary
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/04/2013 02:09 PM Entered By: [REDACTED]

Case Assignment
Safety, Permanence, Well-being

Child Protective Services Investigator (CPSI) [REDACTED] was assigned this P-1 investigation on 8/19/2013. The alleged child victim is listed as [REDACTED]. The allegation is Neglect Death (NGD). The alleged perpetrator is listed as UNKNOWN. The referral intake date and time was 8/16/2013 11:22 AM

Referral Summary: Note: This information is from the original intake, # [REDACTED]. This is a Child Near Death that has now turned into a Child Death. The date and time of this intake was changed to reflect the original date and time of the initial intake.

Note: This child is not currently in DCS Custody.

Reporter states:

[REDACTED] is the mother of an unknown female infant, approximately 8 weeks old. Today (8/16/13), law enforcement responded to a call at the home of [REDACTED] due to the infant not breathing. [REDACTED] is a family friend and a babysitter to the child. [REDACTED] told law enforcement that she found the infant limp and not breathing in her crib. The infants lips were reported to be blue in color at the time that [REDACTED] found the infant unresponsive. [REDACTED] immediately upon finding the infant unresponsive contacted 911.

When 911 responded, it was noted that the infant still was not breathing and CPR was performed. The infant was still reported to be non-responsive. Law enforcement is currently on scene, but the child has been transported to [REDACTED] and will likely be life-flighted to [REDACTED]. There is no known injuries to the child. [REDACTED] is currently being interviewed and has no explanation as to what happened earlier today.

[REDACTED] was contacted by [REDACTED] and arrived shortly after 911 arrived on scene. It is unknown if the infant has responded at this time. Detectives are still speaking with [REDACTED]. It is noted that [REDACTED] does have another child in her care that is reported to be her own 5 months old, name unknown. There are no current concerns with the 5 month



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

old.

This is all the information known at this time. Law enforcement is requesting immediate assistance from the Tennessee Department of Children's Services. The officer that will be the contact with the Sheriffs department is Detective [REDACTED] at the number provided for the referent.

Note: Contact information for the mother of the infant is unknown at this time. The address provided in this intake is for [REDACTED]

Note: It is unknown at the time of the report if the child has a pulse or not. The referent could not state whether or not the child is alive or deceased at this time. As a result, this intake is being treated as a Child Near Death until further information is discovered.

Per SDM: Investigation Track P1 - Child Near Death
[REDACTED] TC, on 8/16/13 @ 11:58am

Notified Child Death/Child Near Death Notification Group via Email:

[REDACTED] and [REDACTED]

The response time for this referral is 07/10/2013 4:15 PM

Notification of referral was sent to the Judge per local protocol.
Notification of the referral was sent to DA.



**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: 08/16/2013

Contact Method: Face To Face

Contact Time: 05:54 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/19/2013

Completed date: 08/19/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/19/2013 08:30 PM Entered By: [REDACTED]

CPSI [REDACTED] entered this face to face contact based on information provided to the worker by CPSI/A [REDACTED]

Face to Face

Child Protective Services Investigator/Assessor [REDACTED] (CPSI/A) made a face to face at [REDACTED] Hospital with the infant to initiate the investigation with the family.

CPSA/I [REDACTED] initiated contacted with the family at the request of Team Leader [REDACTED]

CPSI/A [REDACTED] and [REDACTED] were present during this visit.

Due to the serious and tragic nature of the visit CPSA [REDACTED] did not initiate the paperwork with the family.

*Section I: Interview with the child (private or not private; if not why? And location of interview) -----The worker made face to face contact with [REDACTED] on this day at [REDACTED] Hospital. The worker did not conduct an interview with the child due to age and medical injuries. The worker photographed the child on this day.

*Section II: Interview with the mother (private or not private and location of interview)

Interview should include questions regarding the childrens pediatrician, mental health, physical health/disabilities, medications, domestic violence history, alcohol/drug usage, childrens school attendance/performance, DCS history, police history, employment, education levels, government assistance, past abuse/neglect, etc.-----CPSI [REDACTED] explained the Departments involvement with the family offered the Departments assistance to the family in their time of need. CPSI/A [REDACTED] did not conduct an interview with the family at this time due to the families emotional state. CPSI/A [REDACTED] provided the family with contact information for the assigned worker.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

***Section III: Interview with the father (private or not private and location of interview)**

Interview should include questions regarding the childrens pediatrician, mental health, physical health/disabilities, medications, domestic violence history, alcohol/drug usage, childrens school attendance/performance, DCS history, police history, employment, education levels, government assistance, past abuse/neglect, etc.-----CPSI [REDACTED]

[REDACTED] explained the Departments involvement with the family offered the Departments assistance to the family in their time of need. CPSI/A [REDACTED] did not conduct an interview with the family at this time due to the families emotional state. CPSI/A [REDACTED] provided the family with contact information for the assigned worker.

Section V: CPSI observed:

Document: (if photos were taken, document that they were and that they are in the file):

The worker photographed the infant on this day.

1. interactions between mother/father and child: The father was very emotional and tearful while the worker was present in the hospital room. The mother was composed and calm in the workers presence.
2. observation and presentation (slurred speech, injuries, developmental delays or handicaps, clothing, red eyes, etc.) of child and other individuals in the home: The infant was observed to be laying in a hospital bed hooked to several machines with multiple tubes, leads and IVs attached. The infant was observed to shake and shutter while the worker was taking the photographs.
3. observation of interactions between mother/father and other children in home: Not Applicable
4. observation of physical environment (inside and outside): Not Applicable.

***Required: Section VI: Next Steps: (What are the familys next steps to move the case forward? NONE**

What are the case managers next steps to move case forward or monitor case?) The worker will follow up with [REDACTED] Hospital to check on the status of the infant.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 8/16/13 11:21 AM

Date of Assessment: 9/4/13 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): _____

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: _____