



Tennessee Department of Children's Services
Notice of Child Death/Near Death

Case # 2013.089

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	10/01/2013	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	10//01/2013		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	White (Non Hispanic)	County/Region:	██████████
Parents' Names:	Mother:	██████████	Father:	██████████		
Alleged Perpetrator's Name:	██████████			Relationship to Victim:	██████████	
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:	██████████		
If child is in DCS custody, list placement type and name:						
Describe (in detail) circumstances surrounding death/near death:						
<p>The child, ██████████ had been sick with an ear infection and had been prescribed Ammoxicilian and Zantac for acid reflux and a flu shot by Dr. ██████████ on 9/30/2013. The child was placed in his crib at 1pm and was heard at 1:30pm playing in his crib. ██████████ stated that he had been up all night and was fussy. When ██████████ realized that ██████████ hadn't woken up, she went to wake him. The child, ██████████ was discovered by his mother, ██████████ at around 5:15pm, making gurgling noises and was pale in his crib. She left the room to get her phone and called 911. ██████████ Police arrived at 5:36pm and they found that the child had been moved to the floor, by ██████████ as instructed by the 911 dispatcher. She was attempting to breathe for the child and do chest compressions. When the police arrived the child was un-responsive and not breathing. The police took over doing child rescue breathes and compressions. After doing this for about a minute with no response, the officer rolled the child to his side and began to pat his back. When the child was rolled to the right side, vomit began coming from his mouth and nose. The officer continued patting the child on his back. He then rolled the child back onto his back and CPR was continued until the fire department arrived at the home. When the fire department arrived and EMS arrived, they placed the child in the ambulance and he was transported to ██████████ Medical Center. He was pronounced dead at 6:12pm by Emergency Room Doctor. Body Temperature at time of death was 99 degrees.</p>						
If this is a near death certified by a physician, identify physician by name and provide contact information:						
Name of Physician:	Dr. ██████████	Telephone #	██████████			
Street Address:	██████████		City/State/Zip:	██████████		
Describe (in detail) interview with family:						
<p>The mother was interviewed and details above. ██████████ discovered the child around 5pm pale and making gurgling noises. She picked him up and tried to stimulate him. She attempted to do CPR after calling the police. She was hysterical and the police took over. She is very upset about losing her son. She was very cooperative with CPS interview. She apologized for not remembering exact details from 5pm until the police arrived. She did state that ██████████ had been sick and she took him to see Dr. ██████████ on 9/30/13 and she prescribed Amoxicillan, Zantac and gave ██████████ a flu shot.</p>						
If child was hospitalized, describe (in detail) DCS involvement during hospitalization:						
Taken to Emergency Room only.						
Describe disposition of body (Death):			Sudden Infant Death Syndrome			
Name of Medical Examiner/Coroner:	██████████	Was autopsy requested?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes		
Did CPS open an investigation on this Death/Near Death?			<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes		
Was there DCS involvement at the time of Death/Near Death?			<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child's Case File

CS-0635, Rev. 08/13

RD A 2993

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Intake #:	██████████	Investigation #:	██████████	Date of Report:	Case # 2013-089
Type:		Case #:			
Describe law enforcement or court involvement, if applicable: Please see attached reports. ██████████ police responded at 5:36 and attempted CPR, EMS transported ██████████ to the hospital.					
Describe (in detail) action taken to ensure safety of other children (list names and ages of surviving children) and/or victim (Near Death) (attach safety plan, if applicable): The siblings are staying with extended family in ██████████ along with their parents. There are no concern for their safety at this time.					
Name:	██████████	Age:	7		
Name:	██████████	Age:	2		
Name:		Age:			
Name:		Age:			
Name:		Age:			
Prior DCS involvement with the family. Include dates, type, case #s, allegations, victims, perpetrators (if applicable), and classifications/adjudications (if applicable):					
Date	Case #	Allegations	Victims	Perpetrators	Classification/Adj
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
Any media inquiry or is attention expected?		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	List organizations requesting information:	
Contact Person/Phone Number(s) (include CM, TL, and TC):					
Contact Person:				Telephone Number:	() -
Case Manager:	██████████			Telephone Number:	██████████
Team Leader:	██████████			Telephone Number:	██████████
Team Coordinator:	██████████			Telephone Number:	██████████
ATTACH a copy of the <u>TFACTS Incident Report</u> or if TFACTS is inoperable, <u>DCS Form CS-0496, Serious Incident Report</u> to this notice.					<input type="checkbox"/> No <input type="checkbox"/> Yes
<p>Email to: Child-Fatality-Notification EI-DCS within forty-eight (48) hours of notification Include subject line (in RED): CHILD DEATH [secure email] or CHILD NEAR DEATH [secure email]</p>					



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 10/01/2013 11:41 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 10/02/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 10/02/2013 08:45 AM
First Team Leader Assigned: [REDACTED] Date/Time 10/02/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 10/02/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 4 Mos	Neglect Death	No	Unknown Participant [REDACTED] Unknown	Other Non-relative

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
Referent Address: [REDACTED]
Referent Phone Number: [REDACTED]
Type of Contact: I-3 Phone
Notification: None
Narrative: TFACTS:
Family Case IDs: N/A

Open Court Custody/FSS/FCIP: No

Prior INV/ASMT of Abuse:No
Prior INV/ASMT of Neglect: No
Prior INV/ASMT of both Abuse & Neglect: No
Screen Outs: None

SSMS history: No results found

DUPLICATE REFERRAL: No



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

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

Reporters name/relationship: [REDACTED]

Reporter states: the police were dispatched to [REDACTED] on October 1, 2013 at approximately 5:36pm in regard to a nine month old child being non-responsive and not breathing. The reporter states that upon arrival the police entered the home and heard a female subject call out from the back bedroom. The female, identified as [REDACTED], was on the floor next to the child, identified as [REDACTED] (9 months old). [REDACTED] was on the phone with 911. The child, [REDACTED], was on his back on the floor and was not breathing and not responsive. The child was pale. The police tried to get a pulse and were unsuccessful. At this point, police began to give the child rescue breaths and the reporter began chest compressions. After performing CPR for a minute with no response, an officer rolled the child to his side and began to pat his back. When the child was rolled onto his right side, vomit began coming from his mouth and nose. The officer was told to continue patting the child on his back. He was then rolled back onto his back and CPR was continued until the fire department arrived at the home. When the fire department and EMS arrived, they relieved the police and continued CPR briefly, then put the child into the ambulance. Shortly after the child was placed in the ambulance, he was transported to [REDACTED]. The police made contact with the Criminal Investigations Division and the Crime Scene Analysts. They arrived on the scene shortly thereafter and photographed the area in the home where the child was found. While at [REDACTED], the child was pronounced deceased. Time of death is unknown to the reporter. The reporter was instructed to call the hotline. The police do not suspect neglect in this incident at this time. The cause of death is unknown.

[REDACTED] has two older children, [REDACTED] (7) and [REDACTED] (2). The other children were in the livingroom when the police arrived. Those children were not injured in any way. The children's mother was at the hospital when the police cleared the scene at the home. Neighbors came over and took care of the two older children when Ms. [REDACTED] went to the hospital. Ms. [REDACTED] stepfather (unknown) came to the home and said he would take care of the children at this point. The reporter was told that [REDACTED] was born five weeks premature, but reporter was not able to confirm this. The reporter was told the child had a slight ear infection and was scheduled to get a flu shot on October 2, 2013. The reporter was not able to confirm this statement. [REDACTED] was the only adult at home with the children at the time of the incident. The reporter heard Ms. [REDACTED] say that [REDACTED] had vomited and then wasn't breathing. The reporter doesn't know when the child stopped breathing after having vomited.

Per SDM, Assign Investigative Track P1, The child is now deceased. // [REDACTED] CM3 10/02/2013 @ 1:11am.

CHILD FATALITY GROUP NOTIFIED BY EMAIL: via [REDACTED]
 [REDACTED]; [REDACTED] (RA)

Recipients	Time Issued	Response Received	Devices	Responses	
[REDACTED]	10-02-13 12:57:05 AM CDT	10-02-13 12:57:05 AM CDT	10-02-13 12:57:59 AM CDT	[REDACTED]	Received
	10-02-13 12:57:05 AM CDT	---	[REDACTED]		

Email Sent



**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: 1 Yr 4 Mos

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: Female

Date of Birth [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED]

Race: White

Age: 29 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN:

Race: White

Age: 2 Yrs 7 Mos (Est)

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: Male

Date of Birth [REDACTED]

Partipant ID: [REDACTED]

SSN:

Race: White

Age: 7 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: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 30 Yrs (Est)

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: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: Unable to

Age: 30 Yrs (Est)

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: 10/01/2013

Assignment Date: 10/02/2013

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	Unknown Participant [REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 12/30/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: The autopsy results were inconclusive for a cause of death. The case was classified as AUPU.

D. Case Workers

Case Worker: [REDACTED]

Date: 12/30/2013

Team Leader: [REDACTED]

Date: 12/30/2013

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:

The other children made no disclosures of any abuse or neglect. The home was cluttered, a disc with pictures is in the file.

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

The autopsy was inconclusive. All police investigations cleared the parents of any wrong doing.

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

The mother, [REDACTED], denies any wrong doing.

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

There were no witnesses.



**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:

There was no evidence of abuse or neglect.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 12/30/2013 Contact Method:
 Contact Time: 05:29 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 12/30/2013
 Completed date: 12/30/2013 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: 12/30/2013 05:31 PM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) received case with allegation of neglect death with the ACV being [REDACTED] and the AP unknown. CPSI has pictures of the ACV and the home, they are on a DVD in the file. CPSI interviewed [REDACTED] who stated she discovered [REDACTED] not breathing and pale. She tried to revive him and then called 911. The police and EMS responded and also attempted to resuscitate [REDACTED]. He was transported to [REDACTED] center where he was pronounced dead at 6:12pm by the ER Doctor. CPSI interviewed [REDACTED], [REDACTED], and [REDACTED], and [REDACTED], all who stated they had absolutely no concerns regarding [REDACTED] and the way that his death transpired. The [REDACTED] police and detectives also stated that there were no concerns regarding [REDACTED] untimely death. CPSI observed pictures of the home and found cluttered but free of any visible safety hazards. CPSI is closing the case as AUPU due to the autopsy report being classified as the cause of death could not be determined. Case closed and family referred to services available in the community, the family is attending grief/loss counseling at their church in [REDACTED] where they moved in with her parents, [REDACTED] and [REDACTED].

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

Closing Family Composition:

[REDACTED] mother
 [REDACTED] stepfather
 [REDACTED] (30)
 [REDACTED] (28)
 [REDACTED] (7)
 [REDACTED] (2)



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:	12/30/2013	Contact Method:	
Contact Time:	05:11 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	12/30/2013
Completed date:	12/30/2013	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: 12/30/2013 05:14 PM Entered By: [REDACTED]

CPSI [REDACTED] completed the Closing Safety SDM Assessment. 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. Case is being closed as AUPU.



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: 12/30/2013

Contact Method: Phone Call

Contact Time: 03:49 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/30/2013

Completed date: 12/30/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/30/2013 03:51 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke to the Medical Examiner's office and the autopsy was completed on 12/28/13. They will not fax a copy of the report but they have CPSI [REDACTED] request for a copy on file and it will be submitted.



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: 12/12/2013

Contact Method:

Contact Time: 09:55 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/12/2013

Completed date: 12/12/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/12/2013 09:57 AM Entered By: [REDACTED]

Case Conference

CPSI TL [REDACTED] conducted a case conference on this date with CPSI [REDACTED] CPSI is still awaiting on the autopsy from the medical examiner. Next Steps: continue to contact the examiners office



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: 12/10/2013 Contact Method: Face To Face
 Contact Time: 04:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 12/10/2013
 Completed date: 12/11/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): ACV Interview/Observation,Alleged Perpetrator Interview
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/10/2013 12:59 PM Entered By: [REDACTED]

CPSI [REDACTED] made a face to face visit to follow up with the family in [REDACTED] on my way back from [REDACTED] [REDACTED] was home with her other children, [REDACTED] (2) and [REDACTED] (7). They were observed sitting at the kitchen table playing Go Fish with their grandmother, [REDACTED]. The [REDACTED] family is currently living with the [REDACTED] in [REDACTED]. They moved out of their rental home in [REDACTED] following [REDACTED] death. [REDACTED] was not emotionally able to return to the home so their extended family helped move them out. Most of their belongings are in storage until they decide where in [REDACTED] they want to live, but for now they are welcome to stay with her mom and step-dad. The children seemed content and well-bonded with both the Maternal grandmother and mother, [REDACTED]. There are no concerns with the home environment. It is clean and free from clutter. There are no visible safety concerns. There are no services needed at this time. The family is attending a grief counseling at their church in [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: 12/10/2013

Contact Method:

Contact Time: 12:47 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/10/2013

Completed date: 12/10/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/10/2013 12:53 PM Entered By: [REDACTED]

CPSI [REDACTED] called the Medical Examiner in [REDACTED] and spoke with [REDACTED]. She states that the autopsy has not been completed yet. She will send a copy to CPSI [REDACTED] as soon as it is complete.



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: 11/26/2013

Contact Method: Phone Call

Contact Time: 08:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/26/2013

Completed date: 11/26/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact, Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/26/2013 08:57 AM Entered By: [REDACTED]

CPSI [REDACTED] called the Forensic Medical Management Services in [REDACTED]. Spoke with [REDACTED] CPSI requested any preliminary findings and she stated that the case is still pending. The lab work has not come back.



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: 11/21/2013

Contact Method:

Contact Time: 02:34 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/21/2013

Completed date: 11/21/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/21/2013 02:35 PM Entered By: [REDACTED]

Case Conference

CPSI TL [REDACTED] conducted a case conference on this date with CPSI [REDACTED] CPSI TL [REDACTED] is unable to classify the case due to the autopsy not being back.



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:	11/01/2013	Contact Method:	Attempted Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	11/01/2013
Completed date:	11/01/2013	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Parent/Caretaker Interview,Sibling Interview/Observation		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/01/2013 01:45 PM Entered By: [REDACTED]

CPSI [REDACTED] attempted to make a home visit to follow-up with the family. CPSI [REDACTED] arrived at the home: [REDACTED] [REDACTED]. When CPSI [REDACTED] arrived there was no one home and it appeared as though the home had been vacated. CPSI [REDACTED] called [REDACTED], who stated that they had in fact moved out of the home due to their son dying in that home. They are now living permanently at her mother, [REDACTED] and step-father, [REDACTED], [REDACTED]. She apologized for not letting CPSI [REDACTED] know that they had moved but she did state that they are in Grief Counseling at their church now and are trying to come to terms with the death of their son, [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: 10/08/2013

Contact Method:

Contact Time: 01:50 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/08/2013

Completed date: 10/08/2013

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: 10/08/2013 01:46 PM Entered By: [REDACTED]

Notification of the referral was mailed to the referent.



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:	01:42 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	10/08/2013
Completed date:	10/08/2013	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: 10/08/2013 01:44 PM Entered By: [REDACTED]

CPSI [REDACTED] completed the Initial Safety SDM Assessment. No immediate harm factors were identified at this time. Based on currently available information, there are no children likely to be in immediate danger of serious harm. CPSI had no concerns regarding the welfare of the remaining two children in the home.



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: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/08/2013

Completed date: 10/08/2013

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: 10/08/2013 03:42 PM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) received the records check from the [REDACTED] Sheriff's Department and completed SSMS checks on all perpetrators. There was not SSMS history. Document findings of local background checks.

This CPSI completed checks on all perpetrators at the following websites:

TN Sex Offender - negative

National Sex Offender - negative

TN Felony Offender - negative

Out of State Probation Registry - negative

TN Meth Offender negative

Abuse Registry - negative



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: 10/03/2013

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/08/2013

Completed date: 10/17/2013

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: 10/08/2013 03:50 PM Entered By: [REDACTED]

CPSI [REDACTED] received copies of the emergency room examination and explanation of treatment prior to the child, [REDACTED] being pronounced dead at 6:12 pm. The report stated that the body temperature at the time of death was 99°F at time of death. The cause of death was cardiac Arrest according to ER Doctor, [REDACTED], at [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: 10/03/2013

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

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): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/08/2013 03:52 PM Entered By: [REDACTED]

CPSI [REDACTED] faxed a request for the autopsy results to [REDACTED], [REDACTED] Medical Examiner.



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: 10/03/2013

Contact Method:

Contact Time: 12:33 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/03/2013

Completed date: 10/03/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/03/2013 12:45 PM Entered By: [REDACTED]

Case Conference

CPSI TL [REDACTED] conducted a case conference on this date with CPSI [REDACTED]. CPSI was assigned to this case on 10/1/2013 as a P1 Neglect Death. The victim is [REDACTED] and the alleged perp is unknown. CPSI and the assigned detective initially went to the residence to meet response on the case and the family wasn't there. CPSI contacted the mother via telephone and she informed the worker that she was in [REDACTED] with family along with her children. CPSI traveled to [REDACTED] to interview the entire family. Present at the home were parents, children, maternal grandparents, paternal grandparents, cousin, nieces, and nephews. CPSI reported that the family was very cooperative during this process. The mother reported that she discovered that the child was unresponsive around 5pm and immediately called 911. The mother started CPR until police arrived and took over. EMS continued CPR and transported the child to the hospital. The victim was pronounced dead 6:12pm. CPSI spoke with the emergency room doctor and he is classifying it as SIDS. CPSI spoke with the officer and didn't feel that there had been any abuse or neglect. The home was a little cluttered with toys. CPSI was able to gather pictures from the officer on scene. CPSI offered the family her condolences and services within the community. CPSI completed the child death form and entered the death date into the system. CPSI requested a copy of the autopsy.

Next Steps: follow up with family, follow up with medical examiner, present case to CPIT,



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: 10/02/2013

Contact Method:

Contact Time: 08:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/03/2013

Completed date: 10/03/2013

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: 10/03/2013 03:46 PM Entered By: [REDACTED]

CPSI [REDACTED] completed the Death/Near Death form, CS-0635 and emailed to [REDACTED] TL.

CPSI [REDACTED] faxed a request for the autopsy results to be sent to CPSI [REDACTED] upon completion to The Office of Medical Examiner, [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: 10/02/2013 Contact Method: Face To Face
 Contact Time: 05:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Caretaker Home Created Date: 10/03/2013
 Completed date: 10/17/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact,Parent/Caretaker Interview,Sibling Interview/Observation,Initial ACV Face To Face
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/08/2013 01:52 PM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) attempted to make a home visit to purpose of visit to initiate the investigation. No one was home. CPSI [REDACTED] called the phone number for the mother, [REDACTED], provided by the LPD. [REDACTED] the father, [REDACTED] and their two other children, [REDACTED] and [REDACTED] are staying in [REDACTED] with her mother and step-father, [REDACTED] and [REDACTED]. Address: [REDACTED]. [REDACTED] stated that it would be ok to come and visit them at her mother's home to start the investigation and have a face to face visit with her other children. The ACV [REDACTED], was taken to the Medical Examiner in [REDACTED] for an autopsy.

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

Interview with the child, [REDACTED] (2), private, at grandmother's home in [REDACTED]. The child, [REDACTED] was observed attempting to play Go-Fish with his grandparents, [REDACTED] and [REDACTED] and his paternal grandparents, [REDACTED] & [REDACTED]. He was laughing and appeared healthy and clean and seemed to have a good display of emotional affection towards his parents, [REDACTED] and [REDACTED] and his maternal and paternal grandparents. His last name is [REDACTED] maiden name because the parents had split up at the time of his birth, and they haven't had a chance to change his name.

Interview with child, [REDACTED] (7), prigrandparentsrent's home, [REDACTED]. [REDACTED] was playing Go-Fish with his grandparents. He was quiet and hesitant to answer CPSI [REDACTED] questions. He



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

was watching TV when the emergency with his brother occurred. He was immediately removed by a neighbor until his step-grandfather arrived and took him and his brother from the home. He started to cry and said that he was sad that baby ██████████ went to heaven yesterday. He said he missed him a lot. He stated that his mom is good to him and would never hurt him.

Interview with the mother, ██████████, private, her mother's home upstairs in den:

██████████ was very upset when CPSI ██████████ arrived at the home. She said she thought CPSI ██████████ was there to take her children because of ██████████ death. CPSI ██████████ discussed ██████████ the requirement to investigate all child deaths. She was crying and stated that she really had done everything she could to help ██████████. She had taken him to the doctor, ██████████ on 9/28/13 for an ear infection and then on 9/30/13 for a follow-up visit and the doctor prescribed Zantac for acid reflux and gave ██████████ a flu shot. ██████████ stated that ██████████ had not slept well all week at night so she wasn't surprised that when she put him down for a nap on 10/1/13 that he slept a long time. She laid him down at 1 pm and could still hear him on the baby monitor at 1:30 pm babbling to himself. At 5 pm, she said she realized that he hadn't fussed or cried out and she went to check on him. That was when she discovered him not breathing and pale. She said that she screamed and tried to rouse him. She picked him up and tried to see if he was choking. She couldn't find her cell phone and yelled for ██████████ to help her find it. She finally did and called 911. The operator told her to lay ██████████ on the floor and start CPR. She stated that she was not thinking right and was not sure she was doing it right. She said she was very relieved when the police finally arrived and took over CPR. It was at that time that ██████████ vomited into the officer's mouth and the officer had to leave because he got sick. She stated that another officer took over until EMS arrived a few minutes later. ██████████ was taken by ambulance soon after that and she rode along. She stated that EMS worked on ██████████ in the ambulance. She was crying and saying that she should have checked on him earlier but she just thought he was sleeping. She said that she really is a good mother. She was crying and saying she should have known something was wrong. CPSI ██████████ was able to comfort her until her husband came in the room.

Interview with father, ██████████, private, at his mother-in-law's home in ██████████

██████████ hugged his wife and comforted her but stated that he was at work, for Coke-Cola at the time of the of his son's death. He had a hard time talking with CPSI ██████████ and said that he did not suspect his wife of any wrong doing. She said that she is a stay-at-home mother and is very dedicated to her children. He said that she would lay down her life for them. He stated that he is worried because she keeps saying she should have checked on him sooner. He states that she is not stopped crying since he met her at the hospital. ██████████ was already deceased when he got to the hospital. He said he couldn't talk to anyone for a while because he was in shock.

Interview with ██████████, private, ██████████ mother, at her home:

██████████ states that ██████████ and ██████████ are good parents and she has never had any concerns with either of them. She states that they did break up for a while, that was when she had ██████████ and gave him her maiden name, ██████████ because she thought they might divorce but they didn't. She states ██████████ is a great mother and would do anything to give her children a good life. ██████████ states that ██████████ is very patient and kind and loving and never even spansks the boys. She uses time-outs with the boys. ██████████ states that ██████████ feels responsible for ██████████ death because ██████████ feels she should have checked on him sooner.

Interview with ██████████, private, ██████████ step-father, at their home:

██████████ stated that he was the first family member to get to the family home. He came to get the other two children, ██████████ and ██████████ so that ██████████ could ride in the ambulance. He works locally and was able to get there quickly. He said that ██████████ was hysterical and crying and worried that EMS couldn't find a pulse. He said that the EMS pulled him aside to let him know that the baby was not responding to life saving measures. He also stated that the police told him that they did not suspect any abuse or neglect. ██████████ states that he doesn't have any concerns regarding ██████████ and or ██████████ and their parenting skills. He states that ██████████ and ██████████ are safe with their parents. He stated that they would never do anything to hurt their children and that included ██████████

CPSI ██████████ also spoke with ██████████ and ██████████, ██████████ parents, who were also present at the home of the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] in [REDACTED]

They stated that they have always been very close to [REDACTED] and [REDACTED] and trust them completely. The [REDACTED] and the [REDACTED] families are all very close and have helped [REDACTED] and [REDACTED] to raise the boys. Both state that they have not ever had any concerns regarding either parent and their parenting abilities. Both state that [REDACTED] is very attentive and caring with all of her children. [REDACTED] said that [REDACTED] has always been loving and patient.

CPSI observed:

photos were taken of [REDACTED] the crib and the home, and the DVD of the pictures is in the file. Interactions between mother/father and child, were appropriate. The children seemed bonded with both parents. CPSI found no concerns with any family members regarding the health or well-being of the other two children, [REDACTED] (7) and [REDACTED] (2). The [REDACTED] family is staying with the [REDACTED] for a week or so because [REDACTED] is on fall break.

Pediatrician: [REDACTED], [REDACTED]

Are the children current on Immunizations: yes.

Mental Health: denies any problems.

Physical Health/Disability: [REDACTED] had acid reflux and an ear infection.

Medications: Amoxicillin

Domestic Violence: Denies.

Alcohol/Drug Use: Denies.

School Attendance/Performance: [REDACTED] attends [REDACTED] Primary, 2nd grade.

Department History: Denies.

Police History: Denies.

Employment: [REDACTED].

Government Assistance: The two youngest, [REDACTED] and [REDACTED] are on TennCare, not [REDACTED]

Primary Caretaker History of Abuse/Neglect: [REDACTED]

Prior Residence Cities: [REDACTED], and [REDACTED] was born in [REDACTED] and [REDACTED] was born in [REDACTED]. Both sets of grandparents are also from [REDACTED]. Everyone moved here, the families have always been very close for over 20+ years.

Next Steps:

CPSI will visit the family home as soon as they return to [REDACTED] from [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: 10/02/2013

Contact Method:

Contact Time: 08:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/02/2013

Completed date: 10/03/2013

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: 10/02/2013 09:02 AM Entered By: [REDACTED]

CPSI [REDACTED] entered the date of [REDACTED] death into TFACTS.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/02/2013

Contact Method: Phone Call

Contact Time: 07:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/02/2013

Completed date: 10/03/2013

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: 10/02/2013 08:59 AM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) faxed the referral to [REDACTED] Police Department in order to convene the Child Protective Investigative Team (CPIT). CPSI [REDACTED] called [REDACTED] PD at 9:04 am and a Detective had not been assigned yet. At 1pm Det. [REDACTED] was assigned to this investigation. Det. [REDACTED] was at the scene last night and was not sure why DCS was involved because they had determined that there was no negligence or wrong-doing. CPSI [REDACTED] explained since referral was made it required an investigation. He will meet CPSI [REDACTED] at the family home at 3pm for the family interview. He has pictures of the home and of [REDACTED]. He states that the mother was extremely distraught but very cooperative with investigation. He stated that the father was very quiet but cooperative. Both sets of grandparents were at the hospital.



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:	10/02/2013	Contact Method:	
Contact Time:	02:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	10/02/2013
Completed date:	10/03/2013	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: 10/02/2013 09:16 AM Entered By: [REDACTED]

Child Protective Services Investigator [REDACTED] (CPSI) was assigned this case alleging Neglect Death to ACV, [REDACTED] with Unknown Perpetrator. It was assigned as a P1, Investigative case. The referral was assessed and assigned by TL [REDACTED]. [REDACTED] Response is due on 10/02/2013.

Referral Summary:

Reporter states: the police were dispatched to [REDACTED] on October 1, 2013 at approximately 5:36pm in regard to a nine month old child being non-responsive and not breathing. The reporter states that upon arrival the police entered the home and heard a female subject call out from the back bedroom. The female, identified as [REDACTED] wood, was on the floor next to the child, identified as [REDACTED] (9 months old). [REDACTED] was on the phone with 911. The child, [REDACTED] was on his back on the floor and was not breathing and not responsive. The child was pale. The police tried to get a pulse and were unsuccessful. At this point, police began to give the child rescue breaths and the reporter began chest compressions. After performing CPR for a minute with no response, an officer rolled the child to his side and began to pat his back. When the child was rolled onto his right side, vomit began coming from his mouth and nose. The officer was told to continue patting the child on his back. He was then rolled back onto his back and CPR was continued until the fire department arrived at the home. When the fire department and EMS arrived, they relieved the police and continued CPR briefly, then put the child into the ambulance. Shortly after the child was placed in the ambulance, he was transported to [REDACTED]. The police made contact with the Criminal Investigations Division and the Crime Scene Analysts. They arrived on the scene shortly thereafter and photographed the area in the home where the child was found. While at [REDACTED], the child was pronounced deceased. Time of death is unknown to the reporter. The reporter was instructed to call the hotline. The police do not suspect neglect in this incident at this time. The cause of death is unknown.

[REDACTED] has two older children, [REDACTED] (7) and [REDACTED] (2). The other children were in the livingroom when the police arrived. Those children were not injured in any way. The children's mother was at the hospital when the police cleared the scene at the home. Neighbors came over and took care of the two older children when Ms. [REDACTED] went to the hospital. Ms. [REDACTED] stepfather (unknown) came to the home and said he would take care of the children at this point. The reporter was told that [REDACTED] was born five weeks premature, but reporter was not able to confirm this. The reporter was told the child had a slight ear infection and was scheduled to get a flu shot on October 2, 2013. The reporter was not able to confirm this statement. [REDACTED] was the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

only adult at home with the children at the time of the incident. The reporter heard Ms. [REDACTED] say that [REDACTED] had vomited and then wasn't breathing. The reporter doesn't know when the child stopped breathing after having vomited.

This CPSI verified the family's history of involvement with DCS through a search of TFACTS and the following history was found:

TFACTS:

Family Case IDs: N/A

Open Court Custody/FSS/FCIP: No

Prior INV/ASMT of Abuse: No

Prior INV/ASMT of Neglect: No

Prior INV/ASMT of both Abuse & Neglect: No

Screen Outs: None

SSMS history: No results found

Initial Family Composition:

[REDACTED] (0 years)

[REDACTED] (2)

[REDACTED] (7)

[REDACTED] (28)

Notification of referral was sent to the Judge. Notification of this referral was sent to the District 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: 10/02/2013

Contact Method: Phone Call

Contact Time: 01:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/02/2013

Completed date: 10/03/2013

Completed By: [REDACTED]

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

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/02/2013 09:14 AM Entered By: [REDACTED]

CPSI [REDACTED] received the referral at 12:57am. CPSI called the on-call supervisor, TL, [REDACTED] [REDACTED] to see what she wanted me to do with this referral. She contacted the TC, [REDACTED]. CPSI [REDACTED] spoke to the referent, Law Enforcement who stated that there was no evidence of foul-play, neglect or abuse. He observed the older children, who had not witnessed the emergency, [REDACTED] (7) and [REDACTED] (2), were cared for by the neighbor and then the maternal step-grandfather so that the mother could go to the hospital. He stated that [REDACTED], mother to [REDACTED] was the only adult in the home at the time of the emergency. He will have the Detective call CPSI [REDACTED] in the morning.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 10/1/13 11:41 PM

Date of Assessment: 10/8/13 12:00 AM

Assessment Type: Initial Closing Other

Number of Children in the Household: 3

Section 1: Immediate Harm Factors

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

Yes No

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.



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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: _____