



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 04:46 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 : 07/03/2013 08:12 AM  
First Team Leader Assigned: [REDACTED] Date/Time 07/03/2013 12:00 AM  
First Case Manager [REDACTED] Date/Time 07/03/2013 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	4 Yrs	Neglect Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	10 Yrs	Lack of Supervision	No	[REDACTED]	Birth Mother

**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: Letter

Narrative: TFACTS: Family case [REDACTED] ([REDACTED]) and [REDACTED] ([REDACTED])  
\*\*Names spelled as given by the referent\*\*

Open Court Custody/FSS/FCIP: None

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Indicated

10/25/10 - [REDACTED] - LOS - AP [REDACTED]

7/21/10 - [REDACTED] - LOS - AP [REDACTED]

Fatality No



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

Screened out 4

History (not listed above):

Family case [REDACTED] ([REDACTED]):

1/4/12 - [REDACTED] - DEC, LOS - No Services Needed  
2/28/11 - [REDACTED] - LOS - No Services Needed  
11/17/10 - [REDACTED] - DEC, MDM - No Services Needed  
10/25/10 - [REDACTED] - PYA, DEC - No Services Needed  
5/11/10 - [REDACTED] - LOS, DEC - No Services Needed  
5/30/09 - [REDACTED] - DEC, LOS - No Services Needed  
4/16/09 - [REDACTED] - PYA - No Services Needed  
1/9/09 - [REDACTED] - DEC, ENN - Unfounded  
6/26/08 - [REDACTED] - DEC - No Services Needed  
1/10/08 - [REDACTED] - SRPI, DEC - Services Recommended and Accepted  
12/26/07 - [REDACTED] - SRPI, PHA - Unfounded

Family case [REDACTED] ([REDACTED]):

2/05/13 - [REDACTED] - DEC, DEI, PYA - No Services Needed  
4/17/12 - [REDACTED] - LOS - No Services Needed

DUPLICATE REFERRAL: None

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

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

Reporter states:

[REDACTED] (4) was in the custody of his mother, [REDACTED]. The father of [REDACTED] is [REDACTED]. [REDACTED] has been furloughed out of the [REDACTED] Jail due to todays events. It is unknown if the family had prior involvement with the Tennessee Department of Children Services.

On July 2, 2013 law enforcement received a call to be dispatched out to [REDACTED]'s neighbors home around 12:02 PM EST. Upon arrival at the residence, it was reported that [REDACTED] had been left with his 13 year old cousin, [REDACTED] and brother, [REDACTED] (10). The children were at the residence without adult supervision. According to [REDACTED] and [REDACTED], [REDACTED] was jumping on the bed and fell off the bed. Both boys stated that when [REDACTED] fell, he struck his head on the edge of a nearby television stand. [REDACTED] reportedly after hitting his head, lost consciousness. [REDACTED] and [REDACTED] at that time carried [REDACTED] to the next door neighbors home, which is where law enforcement responded.

[REDACTED] was transported to [REDACTED] Medical Center and shortly after arriving there was pronounced dead. An autopsy has been ordered at this time.

Law enforcement is still investigating the matter. When [REDACTED] spoken to it appears that she had gone shopping, but for where and how long she had been gone is unknown. [REDACTED] and [REDACTED] reported that [REDACTED] had gone to [REDACTED] to go shopping at [REDACTED]

This is all the information given at this time.

\*\*based on TFACTS, there might be another child that lives in the home, a female named [REDACTED] (12).





**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:**                                      **Race:** White                      **Age:** 4 Yrs  
**Address:** [REDACTED]  
**Deceased Date:**  
**School/ ChildCare Comments:**

**Alleged Perpetrator:** No  
**DCS Foster Child:** No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**

**Name:** [REDACTED]  
**Gender:** Male                      **Date of Birth:** [REDACTED]                      **Participant ID:** [REDACTED]  
**SSN:**                                      **Race:**                      **Age:** 13 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]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 10 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: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 34 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

A. Investigation

Case Name: [Redacted]
Referral Date: 07/02/2013
Street Address: [Redacted]
City/State/Zip: [Redacted]

Investigation ID: [Redacted]
Assignment Date: 07/03/2013

B. Allegation

Table with 9 columns: #, Children's Name, DOB/SSN, Specific Allegation for Each Child, Alleged Perpetrator's Name, DOB/SSN, Classification, Severe Abuse, Classified By/Classified Date. Contains 4 rows of allegation data.

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: There is no evidence to support indication of the allegations of Lack of Supervision or Neglect Death with AP [Redacted].

Allegation indicated/Perpetrator Indicated with allegations Physical Abuse and Neglect Death with AP [Redacted], Autopsy reports found the cause of death to be due to [Redacted] being shot in the left side of the skull by a BB gun. [Redacted] was in a caregiving role at the time for [Redacted] and admitted to shooting [Redacted] in the head with a BB gun. [Redacted] was charged with Reckless Homicide.

D. Case Workers

Case Worker: [Redacted]
Team Leader: [Redacted]

Date: 09/03/2013
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.



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

Case Name : ██████████

Investigation ID: ██████████

**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:**

CM ██████ interview ██████ (10yrs, sibling). ██████ reported that he was sleeping "on the green couch" in the living room and that he awoke and saw ██████ sitting in the kitchen floor counting fireworks. ██████ stated that he asked ██████ if her wanted to play Modern Warfare 2 and that they both went into ██████'s bedroom. ██████ reported that he then saw his brother ██████ lying in the floor and that he knew that ██████ was hurt due to seeing a hole in his head. ██████ reported that he and ██████ then carried ██████ to a relatives home (████████) and that 911 was called while ██████ attempted mouth to mouth on ██████. ██████ reported that the last time that he saw ██████ prior to finding him in the floor that ██████ was sitting in the recliner, ██████ was in the living room playing games, and ██████ was on the green couch. ██████ disclosed that he doesnt know why but that he feels that ██████ did something to harm ██████. ██████ then disclosed that ██████ had told ██████ (unknown uncle to ██████) that ██████ had shot a BB gun and that it had bounced off the wall and hit ██████ in the head. ██████ was stating that he doesnt know how this could happen because "you cant shoot a BB gun with the safety on". ██████ reported that he was initially mad at ██████ but now thinks that if ██████ did something it had to be an accident.

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

Law enforcement charged ██████ with reckless homicide. Medical findings report that ██████'s death was caused by a single shot to the left side of the skull by a BB. Concerns were reported due to ██████ telling that he did shoot ██████, but that evidence supports that the timeline/ series of events as told by ██████ was not accurate. ██████ reported that he and ██████ were playing "cops and robbers" and that the shooting was accidental. Evidence does not support this due to their not being two bb guns out as reported by ██████, as well as ██████'s statement that he awoke to find ██████ playing in the floor with fireworks and later finding ██████ injured with ██████ acting like he had just discovered ██████ with ██████. ██████ reported that he woke ██████ up after the accident, which appears to be a false statement.

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

CM ██████ and TL ██████ met with the family and discussed the circumstances surrounding ██████'s death. Mother reported that she had left the home and went to a store in ██████ approx 2 miles from her home (near ██████) to purchase a baby walker. ██████ reported that she left ██████ with ██████ (13yrs, cousin) and ██████ (10yrs, sibling) due to ██████ wanting to stay and play video games with the older boys. ██████ reported that the boys had "always played real good together" and that she didnt know what happened. ██████ reporting regretting not taking her son ██████ with her on this date. ██████ reported that she took ██████ (8mth sibling) with her and that her oldest child ██████ (14yrs, sibling) was with an Aunt at the time. ██████ repeatedly stated that she "wants to find out what happened to ██████".

████████ I was interviewed by Det. ██████ ██████ admitted to shooting ██████ with a BB gun on the date of ██████'s death. ██████ admitted that while he and ██████ was carrying ██████ to his aunts home for medical treatment that ██████ told ██████ the storey about ██████ jumping on the bed and hitting his head, which was false.

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

████████ (4) was in the custody of his mother, ██████. The father of ██████ is ██████. ██████ has been furloughed out of the ██████ Jail due to todays events. It is unknown if the family had prior involvement with the Tennessee Department of Children Services.

On July 2, 2013 law enforcement received a call to be dispatched out to ██████'s neighbors home around 12:02 PM EST. Upon arrival at the residence, it was reported that ██████ had been left with his 13 year old cousin, ██████ and brother, ██████ (10). The children were at the residence without adult supervision.



**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]

According to [REDACTED] and [REDACTED], [REDACTED] was jumping on the bed and fell off the bed. Both boys stated that when [REDACTED] fell, he struck his head on the edge of a nearby television stand. [REDACTED] reportedly after hitting his head, lost consciousness. [REDACTED] and [REDACTED] at that time carried [REDACTED] to the next door neighbors home, which is where law enforcement responded.

[REDACTED] was transported to [REDACTED] Medical Center and shortly after arriving there was pronounced dead. An autopsy has been ordered at this time.

Law enforcement is still investigating the matter. When [REDACTED] spoken to it appears that she had gone shopping, but for where and how long she had been gone is unknown. [REDACTED] and [REDACTED] reported that [REDACTED] had gone to [REDACTED] to go shopping at Ross's.

This is all the information given at this time.

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

[REDACTED] was provided with counseling information services for herself and her children with recommendations that they follow through with this service to assist with grief/loss counseling.

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: 09/03/2013

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 11:59 PM Entered By: [REDACTED]

TL Winters reviewed case for closure. The following tasks were completed:

Date of Referral: 7/2/13

Initial Notification to Juvenile Court: 7/10/13

Notification to DA: 7/10/13

Law Enforcement Notification: 7/10/13

CAC Notification: 7/10/13

SDM Safety Assessment: 7/2/13

FAST: 8/2/13, 9/3/13

Administrative Review(s): 9/3/13

CS-0740 Sent to Juvenile Court: 9/3/13

CS-0740 Sent to District Attorney: 9/3/13

Case Closure Date: 9/3/13

Case Closure Classification: Neglect Death, Physical Abuse Allegations Indicated Perpetrator Indicated, Neglect Death, Lack of Supervision - Allegations Unfounded Perpetrator Unfounded

9/3/13 approximately 5pm, TL [REDACTED] forwarded a copy of the CPS Investigation Summary and Classification Decision of Child Abuse / Neglect Referral to the [REDACTED] Juvenile Court and the [REDACTED] District Attorney's Office via US mail.



**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: 09/03/2013

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 01:33 PM Entered By: [REDACTED]

CM [REDACTED] is presenting this case for closure on this date.

There is no evidence to support indication of the allegations of Lack of Supervision or Neglect Death with AP [REDACTED].

Allegation indicated/Perpetrator Indicated with allegations Physical Abuse and Neglect Death with AP [REDACTED], Autopsy reports found the cause of death to be due to [REDACTED] being shot in the left side of the skull by a BB gun. [REDACTED] was in a caregiving role at the time for [REDACTED] and admitted to shooting [REDACTED] in the head with a BB gun. [REDACTED] was charged with Reckless Homicide.

CS-0740 has been completed and the file will be turned into the TL for Administrative Review and a copy of the 740 will be forwarded to juvenile court.

CM [REDACTED] completed a Family Support Services application for [REDACTED] on this date to address services for [REDACTED] as well as assistance with completion of assessments and further safety plans due to [REDACTED] being charged with reckless homicide and released pending trial. Due to indication for neglect death and physical abuse allegations, Due Process Notifications mailed on this date. CPS formal file review letter A and Attachment for Letter A CS-0554 completed and mailed via certified mail.

Narrative Type: Addendum 1 Entry Date/Time: 09/03/2013 01:40 PM Entered By: [REDACTED]

Autopsy Report not returned at time of case closure.



**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: 09/02/2013

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/03/2013 01:40 PM      Entered By: [REDACTED]

FAST:

9/2/13 FAST completed on this date with Low Intensity Service Recommendation. FAST completed within TFACTS and a copy placed in the case file for review



**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: 08/29/2013 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: 09/03/2013  
 Completed date: 09/03/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): ACV Interview/Observation,Parent/Caretaker Interview  
 Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED]; [REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 09/03/2013 01:54 PM Entered By: [REDACTED]

CM [REDACTED] completed a face to face visit with [REDACTED], [REDACTED], [REDACTED] and [REDACTED] on this date. [REDACTED] reported that the family was going to continue to reside with her mother [REDACTED] at this residence due to being unable to return to her home.

Cm observed [REDACTED], [REDACTED] and [REDACTED] to appear healthy and well-cared for on this date. [REDACTED] reported being "okay" and appeared quiet. [REDACTED] reported that [REDACTED] and [REDACTED] were very close and that [REDACTED] has good days and bad days and that [REDACTED] had been crying right before this CM's arrival. [REDACTED] appeared very emotional, but improved since the initial meeting. [REDACTED] reported having family and church ([REDACTED]) support and that things are hard for her and her family. [REDACTED] expressed feelings of depression, anger, confusion, and sadness and that she depends on her support system at this time. [REDACTED] reported that she and [REDACTED] have seen [REDACTED] at [REDACTED] center two times and the third appointment was September 5th. [REDACTED] requested assistance with locating grief/loss support group or someone who has lost a child to speak with due to feeling alone in her loss. Cm agreed to locate [REDACTED] these supports.

[REDACTED] reported that the next court hearing is September 26th for [REDACTED]'s charges and expressed frustration that [REDACTED] is in the community, around other children and his sibling. [REDACTED] reported she would be at all hearings. [REDACTED] reported not understanding why [REDACTED] harmed [REDACTED] and questioning why [REDACTED] has shown no remorse for [REDACTED]'s death. [REDACTED] reported not allowing [REDACTED] around herself or her children.

Cm explained indication and classification of the case at this time. CM explained the difference between classification and law enforcement charges. CM encouraged [REDACTED] to contact this CM with any questions/needs/concerns and thanked the family for their cooperation and time throughout everything they have experienced. [REDACTED] encouraged this CM to "stop by anytime". Visit concluded.

CM later located POMC (Parents of Murdered Children) website and contacted the chapter president for a local club. Cm provided [REDACTED] with this information for support. CM will also be forwarding a local support group for grief/loss 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:	08/16/2013	Contact Method:	
Contact Time:	05:00 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	09/03/2013
Completed date:	09/03/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/03/2013 11:27 AM      Entered By: [REDACTED]

Referent Contact:

8/16/13 approximately 5pm, CM [REDACTED] forwarded the Confidential Notification Letter for Reporter to the referent as listed. A copy has been placed 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:	08/12/2013	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	09/03/2013
Completed date:	09/03/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/03/2013 01:39 PM      Entered By: [REDACTED]

FAST/FFA:

8/2/13 FAST completed on this date with Low Intensity Service Recommendation. FAST completed within TFACTS and a copy placed in the case file for review.



## 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: 07/17/2013

Contact Method: Face To Face

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/24/2013

Completed date: 07/24/2013

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)**

[REDACTED]; [REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 07/24/2013 02:01 PM Entered By: [REDACTED]

7/17/13 approximately 1pm, CM [REDACTED] presented the following case to the [REDACTED] CPITeam with the following members present: [REDACTED] (CPS Team Leader), [REDACTED] (CAC), [REDACTED] (CAC), [REDACTED] (DAs Office), [REDACTED] (Juvenile Court), [REDACTED] (Sheriffs Office) and [REDACTED] (Police Department). Final recommendation was for Allegation (Neglect Death) to be Unfounded and Perpetrator ([REDACTED]) to be Unfounded, Allegation (Physical Abuse, Neglect Death) to be Indicated and Perpetrator ([REDACTED]) to be Indicated. All members agreed with the presented classification and signed the appropriate form. Forms have been placed in the hard file. Prosecution pending within this jurisdiction.



**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: 07/10/2013

Contact Method: Phone Call

Contact Time: 05:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/10/2013

Completed date: 07/10/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

**Children Concerning****Participant(s)**

Davis, [REDACTED]; [REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 07/10/2013 04:55 PM Entered By: [REDACTED]

CM [REDACTED] contacted [REDACTED] and requested expedited services for [REDACTED]. CTC explained that they could get [REDACTED] in for an appt. Friday 7/12 if the mother would call and schedule the visit. CM contacted [REDACTED] on this date. [REDACTED] reported that she was wanting counseling for [REDACTED] and quickly accepted the services. CM provided the number to the family and encouraged [REDACTED] to access svices at CTC for herself as well due to [REDACTED] reporting that she had not eaten in three days. CM discussed self-care with [REDACTED] who reported that her famiyl was supportive of her and helping her. [REDACTED] agreed to attempt to eat and care for herself through her grief at this time. Cm thanked the family for their time. Call concluded.



**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: 07/10/2013

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/03/2013

Completed date: 09/03/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/03/2013 11:26 AM      Entered By: [REDACTED]

Juvenile Court Notification:

7/10/13 approximately 4pm, CM [REDACTED] forwarded a copy of this report to the [REDACTED] Juvenile Court via US mail.

CAC/DA/LE Contact:

7/10/13 approximately 4pm, CM [REDACTED] forwarded a copy of this report to the [REDACTED] Child Protective Investigative Team, including: [REDACTED] Juvenile Court, [REDACTED] District Attorneys Office, [REDACTED] Sheriffs Dept., [REDACTED] Police Dept., and the Childrens Advocacy Center via US mail and fax.



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: 07/03/2013 Contact Method: Face To Face
Contact Time: 01:00 PM Contact Duration: Less than 03 Hour
Entered By: [Redacted] Recorded For:
Location: Other Community Site Created Date: 09/03/2013
Completed date: 09/03/2013 Completed By: [Redacted]
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)

[Redacted], Lt. [Redacted]; [Redacted]; [Redacted]; [Redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/03/2013 12:18 PM Entered By: [Redacted]

Case Notes:
Time: 1:00pm
Date: 7/3/13
Location: Sheriffs Department [Redacted]
Purpose: Interview [Redacted], [Redacted]
Present:
Inv. [Redacted]
CM [Redacted]

Summary:

[Redacted] was brought to the [Redacted] Sheriffs Department by friends on this date. [Redacted] appeared very weak and to need assistance with walking/standing. [Redacted] was very upset throughout the interview, being observed to be crying and needing to take small breaks throughout the interview process. Inv. [Redacted] interviewed [Redacted] on this date. CM [Redacted] was present in the room. [Redacted] reported that on the morning of [Redacted]'s death that she had [Redacted] ([Redacted]'s brother) [Redacted] ([Redacted]'s sister) and [Redacted] ([Redacted]'s cousin) staying with her at her home. [Redacted] stated that she got up that morning, drank some coffee and fixed the children breakfast. [Redacted] stated that [Redacted] and [Redacted] played outside that morning with some pop-rocks that [Redacted] had gotten [Redacted] from the firework place where [Redacted] had went earlier and spent some money he had gotten a few days prior. [Redacted] stated that the boys came inside and were playing video games and she needed to go to a baby item consignment store less than two miles away. [Redacted] stated that she took [Redacted] with her and asked [Redacted] if he wanted to go with her. [Redacted] stated he wanted to stay and play with [Redacted]. [Redacted] stated that she left the home, told [Redacted] and [Redacted] to stay inside and locked the door behind her. [Redacted] reported that [Redacted] was asleep on the couch when she left and had not been up that morning yet. [Redacted] stated that the store could verify her story. [Redacted] stated that she was almost home when she received a call from family telling her that [Redacted] was hurt. [Redacted] reported that she wanted to know what happened to [Redacted] and kept stating that she wished she could take it back and take [Redacted] with her on that day. [Redacted] reported that she had left the boys together before to run to the store nearby and get cigarettes and short errands like that and that she had never known either [Redacted] or [Redacted] to be mean/aggressive to [Redacted]. [Redacted] reported no altercations/ arguments that morning and denied any concerns prior regarding the children playing together. [Redacted]



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

reported that all three boys knew of the rules to not get the bb guns and to not have them in the house. [REDACTED] reported that she only allowed [REDACTED] to shoot the BB gun into the woods near the home and that [REDACTED] followed this rule. [REDACTED] reported the BB guns were kept under her bed. Interview concluded.

Law Enforcement received confirmation that the cause of death for [REDACTED] was a gunshot to the head, as evidenced by a BB located during the medical exam. Full autopsy report not returned at this time.

CM [REDACTED] spoke with Inv. [REDACTED] regarding the statement [REDACTED] provided to this CM on 7/2/13 that [REDACTED] had told his uncle [REDACTED] that [REDACTED] had shot a BB and that it had accidentally hit [REDACTED] in the head. Inv. [REDACTED] contacted [REDACTED] (mat. Grandmother) and received contact information for [REDACTED]. Inv. [REDACTED] spoke with [REDACTED] who verified that [REDACTED] had made this statement to him. Due to the information received, Inv. [REDACTED] requested to interview [REDACTED] again on this date. CM [REDACTED] assisted with locating [REDACTED] ([REDACTED]'s mother) who reported that [REDACTED] was staying with his father [REDACTED]. [REDACTED] contacted [REDACTED] and arranged to bring [REDACTED] to the sheriffs department for questioning. CM observed multiple family members at the home of [REDACTED] where [REDACTED] was located. The family members encouraged [REDACTED] and [REDACTED] to cooperate with law enforcement and to have [REDACTED] tell the truth to find out what happened. CM observed all family members to be very emotional and to be questioning the initial story told by [REDACTED] and [REDACTED] that [REDACTED] hit his head after jumping on the bed. [REDACTED] reported that [REDACTED] was her son and that while she would cooperate she needed to think about what was best for him as well. The family agreed to meet at approx. 2:30pm at the sheriffs department on this date.

CM [REDACTED] arrived at the Sheriffs department and observed the interview of [REDACTED], [REDACTED], and [REDACTED] on this date with Inv. [REDACTED] completing the interview. Cm observed the interview via video recording from another room. During the interview, [REDACTED] appeared non-emotional. Law enforcement reported [REDACTED] was calm, blowing bubbles with gum, and to appear to be unaffected by his cousins death. [REDACTED] admitted to shooting [REDACTED] with a BB gun on the date of [REDACTED]'s death. [REDACTED] reported that he stood back from [REDACTED], with [REDACTED] being near the entrance to a bathroom and shot [REDACTED]. [REDACTED] reenacted this event. [REDACTED] stated that he woke up [REDACTED] and told [REDACTED] about this. [REDACTED] admitted that while he and [REDACTED] was carrying [REDACTED] to his aunts home for medical treatment that [REDACTED] told [REDACTED] the story about [REDACTED] jumping on the bed and hitting his head, which was false. Interview concluded.

Law enforcement reported that due to the medical reports, statements from [REDACTED], [REDACTED], and [REDACTED]'s admission that charges would be pursued for [REDACTED] at this time, reckless homicide. Cm received police reports, 911 reports, and medical examiner reports on this date.

Narrative Type: Addendum 1 Entry Date/Time: 09/03/2013 01:17 PM Entered By: [REDACTED]

Background Checks:

Background checks received with the following results:

No Prior Juvenile Records reported from Juvenile court regarding previous adjudications of [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: Face To Face  
 Contact Time: 06:00 PM Contact Duration: Less than 02 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Family Home Created Date: 07/24/2013  
 Completed date: 08/02/2013 Completed By: System Completed  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Court Hearing,Initial ACV Face To Face,Parent/Caretaker Interview,Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/24/2013 05:30 PM Entered By: [REDACTED]

CM [REDACTED] and TL [REDACTED] attempted to complete a home visit with [REDACTED] at her residence. Upon arrival, family reported that they were cleaning up the home and that [REDACTED] was with her children at [REDACTED]'s mothers home [REDACTED] where family was there to support her. CM requested to enter the home, but the family reported that they had things pulled out from under the sink and the house a mess from discovering a leak under the sink and didnt want to bring anyone into the home. CM [REDACTED] and TL [REDACTED] met with the family and discussed the circumstances surrounding [REDACTED]'s death. [REDACTED] reported that she had left the home and went to a store in [REDACTED] approx 2 miles from her home (near [REDACTED]) to purchase a baby walker. [REDACTED] reported that she left [REDACTED] with [REDACTED] (13yrs, cousin) and [REDACTED] (10yrs, sibling) due to [REDACTED] wanting to stay and play video games with the older boys. [REDACTED] reported that the boys had "always played real good together" and that she didnt know what happened. [REDACTED] reporting regretting not taking her son [REDACTED] with her on this date. [REDACTED] reported that she took [REDACTED] (8mth sibling) with her and that her oldest child [REDACTED] (14yrs, sibling) was with an Aunt at the time. [REDACTED] stated that when she left the home that [REDACTED] was asleep on the couch and [REDACTED] and [REDACTED] were playing video games in the bedroom. [REDACTED] reported that she was gone less than 30 minutes and was returning home when she recieved the call reporting that [REDACTED] was hurt. [REDACTED] repeatedly stated that she "wants to find out what happened to [REDACTED]".

CM [REDACTED] interview [REDACTED] (10yrs, sibling). [REDACTED] reported that he was sleeping "on the green couch" in the living room and that he awoke and saw [REDACTED] sitting in the kitchen floor counting fireworks. [REDACTED] stated that he asked [REDACTED] if her wanted to play Modern Warfare 2 and that they both went into [REDACTED]'s bedroom. [REDACTED] reported that he then saw his brother [REDACTED] lying in the floor and that he knew that [REDACTED] was hurt due to seeing a hole in his head. [REDACTED] reported that he and [REDACTED] then carried [REDACTED] to a relatives home ([REDACTED]) and that 911 was called while [REDACTED] attempted mouth to mouth or [REDACTED]. [REDACTED] reported that the last time that he saw [REDACTED] prior to finding him in the floor that [REDACTED] was sitting in the recliner, [REDACTED] was in the living room playing games, and [REDACTED] was on the green couch. [REDACTED] disclosed that he doesnt know why but that he feels that [REDACTED] did something to harm [REDACTED]. [REDACTED] then disclosed that [REDACTED] had told [REDACTED] (unknown uncle to [REDACTED]) that [REDACTED] had shot a BB gun and that it had bounced off the wall and hit [REDACTED] in the head. [REDACTED] was stating that he doesnt know how this could happen because "you cant shoot a BB gun with the safety on". [REDACTED] reported that he was initially mad at [REDACTED] but now thinks that if [REDACTED] did something it had to be an accident.

Upon arrival,



**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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Narrative Type: Addendum 1    Entry Date/Time: 09/03/2013 12:19 PM    Entered By: [REDACTED]

Note system completed, please refer to other Initial Face to Face not entered into TFACTS for full narrative.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 07/02/2013 Contact Method: Face To Face  
 Contact Time: 06:00 PM Contact Duration: Less than 02 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Family Home Created Date: 09/03/2013  
 Completed date: 09/03/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Collateral Contact,Initial ACV Face To Face,Parent/Caretaker Interview,Sibling Interview/Observation  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/03/2013 01:18 PM Entered By: [REDACTED]

## Case Notes:

Time: 6:00pm

Date: 7/2/13

Location: Home of [REDACTED] (mat. Grandmother)

Purpose: Initial Response

Present:

TL [REDACTED]

CM [REDACTED]

ACV- [REDACTED]

Siblings- [REDACTED], [REDACTED]

Cousin/ other involved child- [REDACTED] and his mother [REDACTED]

Various other relatives present supporting the family including ([REDACTED], [REDACTED], [REDACTED])

## Household Composition:

## Family Members:

[REDACTED] (birth mother/alleged perpetrator)

[REDACTED] (ACV, 10yrs)

[REDACTED] (ACV, 4yrs)

[REDACTED] (sister, 14yrs)

[REDACTED] (sister, 8mth)

Contact Info: [REDACTED]

Address: Address at time of referral: [REDACTED]

Current Address: [REDACTED]

P1 received while on-call, Allegations Neglect Death/Lack of Supervision. CM [REDACTED] contacted TL [REDACTED], TL [REDACTED]. TL [REDACTED] contacted TC [REDACTED] and Deputy RA [REDACTED] to report fatality investigation.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

[REDACTED] Close

Organization: [REDACTED]

CM [REDACTED] contacted Inv. [REDACTED] (CPIT member) on this date. Inv. [REDACTED] reported that the child was found unresponsive and pronounced dead at [REDACTED] Hospital on this date. CM [REDACTED] did not observe the child due to the child being deceased upon receipt of referral. Inv. [REDACTED] reports the child was observed to have a head injury on this date. Exact cause of death unknown at this time. The child [REDACTED] 4yrs. was with his brother [REDACTED] 10yrs, and cousin [REDACTED] 12yrs at the time of the incident. The children reported that [REDACTED] was jumping on a bed and hit his head on the nightstand causing the injury. There are concerns at this time after initial examination of [REDACTED] that the statements from the children is not accurate and death is being considered suspicious at this time. Autopsy is being requested.

CM [REDACTED] and TL [REDACTED] attempted to complete a home visit with [REDACTED] at her residence at [REDACTED]. Upon arrival, extended family reported that they were cleaning up the home and that [REDACTED] was with her children at [REDACTED]'s mothers home ([REDACTED]) where family was there to support her. CM requested to enter the home, but the family reported that they had things pulled out from under the sink and the house a mess from discovering a leak under the sink and didnt want to bring anyone into the home. CM [REDACTED] and TL [REDACTED] met with the family and discussed the circumstances surrounding [REDACTED]'s death. [REDACTED] reported that she had left the home and went to a store in [REDACTED] approx. 2 miles from her home (near [REDACTED]) to purchase a baby walker. [REDACTED] reported that she left [REDACTED] with [REDACTED] (13yrs, cousin) and [REDACTED] (10yrs, sibling) due to [REDACTED] wanting to stay and play video games with the older boys. [REDACTED] reported that the boys had "always played real good together" and that she didnt know what happened. [REDACTED] reported regretting not taking her son [REDACTED] with her on this date. [REDACTED] reported that she took [REDACTED] ( 8mth sibling) with her and that her oldest child [REDACTED] (14yrs, sibling) was with an Aunt at the time. [REDACTED] stated that when she left the home that [REDACTED] was asleep on the couch and [REDACTED] and [REDACTED] were playing video games in the bedroom. [REDACTED] reported that she was gone less than 30 minutes and was returning home when she received the call reporting that [REDACTED] was hurt. [REDACTED] repeatedly stated that she "wants to find out what happened to [REDACTED]".

CM [REDACTED] interview [REDACTED] (10yrs, sibling). [REDACTED] reported that he was sleeping "on the green couch" in the living room and that he awoke and saw [REDACTED] sitting in the kitchen floor counting fireworks. [REDACTED] stated that he asked [REDACTED] if her wanted to play Modern Warfare 2 and that they both went into [REDACTED]'s bedroom. [REDACTED] reported that he then saw his brother [REDACTED] lying in the floor and that he knew that [REDACTED] was hurt due to seeing a hole in his head. [REDACTED] reported that he and [REDACTED] then carried [REDACTED] to a relatives home ([REDACTED]) and that 911 was called while [REDACTED] attempted mouth to mouth on [REDACTED]. [REDACTED] reported that the last time that he saw [REDACTED] prior to finding him in the floor that [REDACTED] was sitting in the recliner, [REDACTED] was in the living room playing games, and [REDACTED] was on the green couch. [REDACTED] disclosed that he doesnt know why but that he feels that [REDACTED] did something to harm [REDACTED]. [REDACTED] then disclosed that [REDACTED] had told [REDACTED] (unknown uncle to [REDACTED]) that [REDACTED] had shot a BB gun and that it had bounced off the wall and hit [REDACTED] in the head. [REDACTED] was stating that he doesnt know how this could happen because "you cant shoot a BB gun with the safety on". [REDACTED] reported that he was initially mad at [REDACTED] but now thinks that if [REDACTED] did something it had to be an accident.

CM [REDACTED] and TL [REDACTED] completed an IPA (permission received from DCS Atty [REDACTED], TL [REDACTED]) with [REDACTED] (due to supervision concerns) stating that the children would be cared for and supervised by relatives until further investigative steps were completed. [REDACTED] was requested to have no contact (due to the open investigation) with [REDACTED], [REDACTED], [REDACTED] and was taken to his fathers home [REDACTED] by his mother [REDACTED] on this date. Non-custodial expedited completed with the following plan:

[REDACTED] and [REDACTED] will be cared for by [REDACTED] until further investigation. [REDACTED] will be cared for by [REDACTED] and [REDACTED] until further investigation. [REDACTED] can have contact with the children.

CM provided the mother with copies of the DCS Privacy Practices/HIPPA information, the DCS Clients Rights handbook, a brochure about the MRS approach, and a Notification of Equal Access to Programs, Services, and Grievance Procedures. CM explained each document. Genogram updated. The mother was unable to complete paperwork on this date.

**Collateral Contacts:**

7/2/13- CM [REDACTED] and TL [REDACTED] spoke with multiple relatives including the following: [REDACTED] and [REDACTED] (cousins [REDACTED], [REDACTED]) [REDACTED] (mat. Grandmother [REDACTED]) as well as other extended relatives and church members of [REDACTED] who were aware of the current investigation and present at the initial meeting with the family. There were no concerns expressed by any family members/friends/acquaintances to this CM throughout the investigation regarding the safety of [REDACTED], [REDACTED], [REDACTED], or [REDACTED].



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] while in the care of [REDACTED]. No information was received throughout the investigation supporting that [REDACTED] should have had concerns for leaving [REDACTED] and [REDACTED] in the care of [REDACTED]. There was no information received supporting prior concerns regarding [REDACTED] treatment or care of [REDACTED]. [REDACTED] was accompanied on one occasion to the sheriffs department by a teacher/church member of [REDACTED], [REDACTED], and [REDACTED]. The member reported taking all three boys to the zoo recently on a trip and reporting no concerns ever being observed regarding the treatment of [REDACTED] from [REDACTED] or [REDACTED].

## Photograph:

No photographs taken due to no camera being available

## Safety Assessment:

7/2/13 SDM Safety Assessment completed with decision of conditionally safe at this time. ACVs were placed under the care of supervision of relatives through a non-custodial expedited until further investigation. [REDACTED] was requested to have no contact with [REDACTED] until further investigation.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/02/2013

Contact Method:

Contact Time: 04:46 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 07/24/2013

Completed date: 07/24/2013

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: 07/24/2013 05:12 PM Entered By: [REDACTED]

CPS referral received  
P1 Neglect Death/Lack of Supervision

[REDACTED] (4) was in the custody of his mother, [REDACTED]. The father of [REDACTED] is [REDACTED]. [REDACTED] has been furloughed out of the [REDACTED] Jail due to todays events. It is unknown if the family had prior involvement with the Tennessee Department of Children Services.

On July 2, 2013 law enforcement received a call to be dispatched out to [REDACTED]'s neighbors home around 12:02 PM EST. Upon arrival at the residence, it was reported that [REDACTED] had been left with his 13 year old cousin, [REDACTED] and brother, [REDACTED] (10). The children were at the residence without adult supervision. According to [REDACTED] and [REDACTED], [REDACTED] was jumping on the bed and fell off the bed. Both boys stated that when [REDACTED] fell, he struck his head on the edge of a nearby television stand. [REDACTED] reportedly after hitting his head, lost consciousness. [REDACTED] and [REDACTED] at that time carried [REDACTED] to the next door neighbors home, which is where law enforcement responded.

[REDACTED] was transported to [REDACTED] Medical Center and shortly after arriving there was pronounced dead. An autopsy has been ordered at this time.

Law enforcement is still investigating the matter. When [REDACTED] spoken to it appears that she had gone shopping, but for where and how long she had been gone is unknown. [REDACTED] and [REDACTED] reported that [REDACTED] had gone to [REDACTED] to go shopping at Ross.

This is all the information given at this time.

Narrative Type: Addendum 1 Entry Date/Time: 09/03/2013 11:25 AM Entered By: [REDACTED]

**Case History:**

History regarding [REDACTED] Family:

[REDACTED]	02/05/2013	[REDACTED]	Assessment Closed
[REDACTED]	03/14/2012	[REDACTED]	Assessment Closed



Tennessee Department of Children's Services  
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

History regarding [REDACTED]

Family:

- Assessment 2 Closed 01/10/2012
- Assessment 2 Closed 03/17/2011
- Assessment 3 Closed 02/03/2011
- Assessment 2 Closed 02/03/2011
- Investigation 2 Closed 07/21/2010
- Assessment 2 Closed 05/11/2010
- Assessment 2 Closed 05/30/2009
- Assessment 2 Closed 04/23/2009
- Assessment 3 Closed 06/26/2008
- Assessment 2 Closed 01/10/2008
- Investigation 2 Closed 12/26/2007



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 4:46 PM

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

Assessment Type: [X] 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):
[X] 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.
[X] 3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
[X] 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.
[X] 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): IPA completed Children being supervised by family

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.
[X] 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: \_\_\_\_\_