



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

Intake

Intake ID: [REDACTED]

Intake Taken By: [REDACTED]

Intake Date/Time: 07/06/2013 08:41 PM CT

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [REDACTED]

Date Screened: 07/06/2013

Investigation

Investigation ID: [REDACTED]

First County/Region: [REDACTED]

Date/Time Assigned : 07/08/2013 10:12 AM

First Team Leader Assigned: [REDACTED]

Date/Time 07/08/2013 12:00 AM

First Case Manager: [REDACTED]

Date/Time 07/08/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yrs	Drug Exposed Infant	No	[REDACTED]	Grandmother
[REDACTED]	1 Yrs	Environmental Neglect	No	[REDACTED]	Birth Mother
[REDACTED]	1 Yrs	Environmental Neglect	No	[REDACTED]	Birth Father
[REDACTED]	1 Yrs	Neglect Death	Yes	[REDACTED]	Grandmother
[REDACTED]	Yrs	Drug Exposed Child	No	[REDACTED]	Grandmother
[REDACTED]	Yrs	Environmental Neglect	No	[REDACTED]	Birth Father
[REDACTED]	Yrs	Environmental Neglect	No	[REDACTED]	Birth Mother
[REDACTED]	Yrs	Drug Exposed Child	No	[REDACTED]	Grandmother
[REDACTED]	Yrs	Environmental Neglect	No	[REDACTED]	Birth Mother
[REDACTED]	Yrs	Environmental Neglect	No	[REDACTED]	Birth Father



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

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 IDs: [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Indicated None

Fatality No

Screened out 1

History (not listed above):

[REDACTED]/PYA/10.07.2011, [REDACTED] and [REDACTED]/Services Recommended and Accepted

DUPLICATE REFERRAL: No

County: [REDACTED]

Notification: Letters

School/ Daycare: None/Unknown

Native American Descent: None

Directions: None given

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

Reporter states:

[REDACTED] (6 mos.) lives with her mother and father, [REDACTED] and [REDACTED]. There are two other children in the home. The names and ages are unknown at this time. The grandmother [REDACTED] resides with the family.

The two older children and the parents were helping another family member move in [REDACTED]. When they returned home this evening (07/06/2013), [REDACTED] walked in first, and observed [REDACTED] asleep on the loveseat. He then saw [REDACTED]'s feet sticking out from underneath the grandmother. The grandmother is reported to be very heavy. [REDACTED] reported she had fallen asleep while feeding [REDACTED] a bottle. While at the hospital [REDACTED] requested that [REDACTED] be drug tested; he stated that she is on Xanax. [REDACTED] reportedly has a prescription for Xanax.

The autopsy is pending at this time. The older children are currently with the parents. They are believed to be safe. The assistant district attorney may charge [REDACTED] with negligent



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

manslaughter. At the hospital, [REDACTED] appeared to be well nourished and well taken care of. There were no obvious signs of abuse.

The home where the family lives was described as nasty. There was clutter including old clothes, trash, and junk, but nothing hazardous.

There is a long history of domestic disputes between the parents . It was reported [REDACTED] has been in jail for domestic dispute. It was reported [REDACTED] attempted to hang himself in the past.

No special needs or disabilities are known.

Per SDM: Investigative Track, P1

Event [20]Alert Started (5695), Status: [20]Alert Started, [REDACTED]
Event [07]Group Started (5695/39854), Status: [07]Group Started, [REDACTED] [REDACTED]
paged @ 9:38 pm
TL [REDACTED] responded to the page at 9:39pm

[REDACTED] CM 3 @ 9:38 p.m. on 7/6/13

The county was notified at 9:38 pm

Child Fatality Group was notified at 9:38 p.m. on 7/6/13

[REDACTED]



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: 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:

Name: [REDACTED]

Gender: Female

Date of Birth [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 27 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN: [REDACTED] **Race:** White **Age:** 1 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: Female

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 55 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED], [REDACTED], [REDACTED]

Gender: [REDACTED] **Date of Birth:** [REDACTED]

Partipant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED]

Age: [REDACTED]

Address: [REDACTED]

Deceased Date: [REDACTED]

School/ ChildCare Comments: [REDACTED]

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED], [REDACTED], [REDACTED]

Gender: [REDACTED] **Date of Birth:** [REDACTED]

Partipant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED]

Age: [REDACTED]

Address: [REDACTED]

Deceased Date: [REDACTED]

School/ ChildCare Comments: [REDACTED]

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 07/06/2013

Assignment Date: 07/08/2013

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]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/09/2013
2	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/09/2013
3	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/09/2013
4	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED] 08/09/2013
5	[REDACTED]	[REDACTED]	Drug Exposed Child	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/09/2013
6	[REDACTED]	[REDACTED]	Drug Exposed Child	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/09/2013
7	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 08/09/2013
8	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/09/2013



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]

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 two rows of data for cases 9 and 10.

C. Disposition Decision

Disposition Decision: Continue DCS Services

Comments: CPSI investigated the case and found that the child [REDACTED] was the victim of a neglect death. The person responsible for the child's death was the maternal grandmother who was keeping the child at the time of the child's death. the parents were not even home when the child died. CbPSI obtained written statements from everyone involved in the case. CPSI had the parents and grandmother drug screened through hair and random urine screen. CPSI presented the case to the Child Protective Investigative Team. The autopsy results are not back yet.

D. Case Workers

Case Worker: [REDACTED]

Date: 10/02/2013

Team Leader: [REDACTED]

Date: 10/02/2013

E. Investigation Summary

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

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

CPSI went to the scene the next morning after another Assessment worker had worked the death the night before. CPSI saw the other 2 children, but they were not present at the time of death.

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 results are still under investigation. [REDACTED] who was the doctor on call the day of the death stated pending investigation.

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

The alleged perpetrator stated that the baby and her went to sleep while watching something funny on TV.

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

CPSI completed a reenactment of what [REDACTED] saw when he entered the room. CPSI also did the same thing with [REDACTED] and even took pictures when [REDACTED] completed his. CPSI took written statements from everyone in the home. A copy is in the hard file.



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

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

The Child Protective Investigative Team also felt like this is a neglect death and has sent it for prosecution.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/02/2013	Contact Method:	
Contact Time:	11:22 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	10/02/2013
Completed date:	10/02/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/02/2013 11:23 AM Entered By: [REDACTED]

Case summary:

CPSI investigated the case and found that the child [REDACTED] was the victim of a neglect death. The person responsible for the child's death was the maternal grandmother who was keeping the child at the time of the child's death. the parents were not even home when the child died. CbPSI obtained written statements from everyone involved in the case. CPSI had the parents and grandmother drug screened through hair and random urine screen. CPSI presented the case to the Child Protective Investigative Team. The autopsy results are not back yet.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/27/2013	Contact Method:	Correspondence
Contact Time:	12:14 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	09/29/2013
Completed date:	09/29/2013	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: 09/29/2013 12:16 PM Entered By: [REDACTED]

CPSI put in for [REDACTED] to submit to a hair follicle. CPSI also put in for the grandmother [REDACTED] to submit to a hair follicle test.



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: 09/27/2013 Contact Method: Face To Face
 Contact Time: 11:00 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 09/29/2013
 Completed date: 09/29/2013 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]; [REDACTED]; [REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2013 04:14 PM Entered By: [REDACTED]

A transfer meeting was held to hand the case off to an FSW for further monitoring. A new non-custodial plan was completed.

The strengths and needs stayed the same in the prior non-custodial plan.

The father [REDACTED] will be drug free.

[REDACTED] will submit to random drug screens/ hair follicles/ and nail beds.

The parents will continue their counseling with [REDACTED]

The children will be safe at all times.

The grandmother [REDACTED] has to be supervised at all times with the children.

The children will be mentally stable.

The children will continue counseling to help with grief.

The family will continue with in-home services.

People who signed the plan:

FSW, CPSI, TL [REDACTED], [REDACTED], [REDACTED], and [REDACTED]. The children were not present at this meeting due to them being at school.



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: 09/17/2013 Contact Method: Face To Face
 Contact Time: 03:30 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/29/2013
 Completed date: 09/29/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): ACV Interview/Observation,Alleged Perpetrator Interview,Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning

[REDACTED]; [REDACTED]

Participant(s)

[REDACTED]; [REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2013 04:39 PM Entered By: [REDACTED]

CPSI and CPSA [REDACTED] went to the family home at [REDACTED]. When we first arrived home the only people there were [REDACTED], [REDACTED], and [REDACTED]. [REDACTED] was jumping on the trampoline. [REDACTED] showed CPSI his new van. [REDACTED] asked CPSI of the autopsy results were in yet. CPSI explained that they are not. [REDACTED] stated that he wanted to know for sure that [REDACTED] killed his daughter. [REDACTED] stated that he has felt it in his gut the whole time and he needed proof. CPSI explained that an autopsy could take awhile. CPSI asked [REDACTED] the father if he would submit to a urine drug screen? eddie stated yes. CPSA worker went with [REDACTED] to take the urine screen. [REDACTED] was positive for his prescription medication benzodiazepines, opiates, and oxycodine.

A few minutes later [REDACTED], [REDACTED] and [REDACTED] pulled up. CPSI talked with [REDACTED] to see how she was holding up. [REDACTED] stated the best she could. CPSI asked if there was anything the Department could do to help make it easier. [REDACTED] stated no. CPSI asked if [REDACTED] has been taking her prescription medication like prescribed. [REDACTED] is scared of medication. [REDACTED] stated that she is doing better with it. CPSI asked how the girls are doing? [REDACTED] stated [REDACTED] appears to be fine, but [REDACTED] has a hard time with it sometimes.

CPSI and [REDACTED] went to look at [REDACTED]'s new puppy. [REDACTED] talked about school. CPSI asked if [REDACTED] was coming out to see her? [REDACTED] stated yes and that they have fun together. [REDACTED] is the counselor. CPSI asked if [REDACTED] feels safe in the home? [REDACTED] stated yes. CPSI asked [REDACTED] about missing her sister [REDACTED]. [REDACTED] stated that she misses her, but she is an angel now. CPSI and [REDACTED] played with the puppy and talked about all kinds of fun things.

CPSI went into the home to talk with [REDACTED] and explain to her that DCS would be indicating her with a neglect death. [REDACTED] did not say much at all. [REDACTED] went off on CPSI. [REDACTED] stated that everyone she knows sleep in the bed with their babies. CPSI explained that no adult should sleep in the bed with a child. [REDACTED] wanted to know if her mother would go to jail? CPSI explained that CPS does not criminally charge people that would be up to law enforcement and the ADA. [REDACTED] stated that is just crazy. CPSI explained again that it is not a call that The Department of Children's Services makes.

CPSI asked the grandmother to submit to a drug screen and she did. The grandmother was only positive for benzo's, but at the time of the child's death she was positive for opiates.



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: 08/13/2013

Contact Method:

Contact Time: 09:40 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/13/2013

Completed date: 08/13/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/13/2013 10:07 AM Entered By: [REDACTED]

Team Leader [REDACTED] is reviewing case for monthly review. Case will be discussed with [REDACTED] during her MPB.



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: 07/31/2013 Contact Method: Face To Face
 Contact Time: 09:00 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 09/29/2013
 Completed date: 09/29/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): ACV Interview/Observation,Alleged Perpetrator Interview,Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning

[REDACTED]; [REDACTED]

Participant(s)

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2013 04:04 PM Entered By: [REDACTED]

Another Non-custodial plan was completed with [REDACTED], [REDACTED], [REDACTED], [REDACTED], CPSI [REDACTED] and TL [REDACTED].

The reason the family was brought to the attention of CPS is due to allegations of drug exposed infant, environmental neglect, and neglect death.

Strengths for the family is that they are cooperating fully with DCS and law enforcement.

Needs and Concerns:

The father tested positive for drugs on a hair follicle test.

The family has a child that died for unknown reasons while in the care of [REDACTED] (grandmother)

The family has a past history with DCS for domestic violence.

Desired outcome:

[REDACTED] will complete a mental health intake.
 [REDACTED] will submit to random drug screens as well as hair follicles and nail beds.
 The parents will also have a mental health assessment for [REDACTED]

The mother and father will be mentally healthy.

[REDACTED] and [REDACTED] will continue with mental health counseling. [REDACTED] and [REDACTED] will have grief counseling to help them deal with the death of a child.

The father will only have supervised contact due to his drug screen.

The children will be drug free and live in a drug free environment.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

The children will submit to hair follicles.

The mother's religion does not allow cutting of the hair so we will attempt to do nails.

The children will be safe at all times.

The children have to be supervised at all times with [REDACTED].

The people who signed the plan were [REDACTED] CPSI, TL [REDACTED], [REDACTED] mother, and [REDACTED] father.

[REDACTED] was sound asleep through the meeting. CPSI went out to the toy room and spoke with [REDACTED]. [REDACTED] was happy and laughing. CPSI asked how things were going at home? [REDACTED] stated good. CPSI sat in the floor and played dolls with [REDACTED] for a little while. [REDACTED] did not bring up her sister [REDACTED] that died earlier that month.



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:	07/26/2013	Contact Method:	
Contact Time:	02:10 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/26/2013
Completed date:	07/26/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/26/2013 02:38 PM Entered By: [REDACTED]

Team Leader [REDACTED] is reviewing case for monthly review. The hair follicle was completed for the grandmother with results placed in file. Case was presented to CPIT earlier this month and asked to bring back until further information was gathered to share with the team.



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: 07/18/2013

Contact Method:

Contact Time: 04:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 07/19/2013

Completed date: 07/19/2013

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: 07/19/2013 09:10 AM Entered By: [REDACTED]

CPSI received the hair follicle results on [REDACTED]. [REDACTED] tested positive for opiates at a level of opiates for hydrocodone 317 pg/mg.



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: 07/11/2013

Contact Method: Face To Face

Contact Time: 02:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/29/2013

Completed date: 09/29/2013

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: 09/29/2013 03:43 PM Entered By: [REDACTED]

CPSI along with ADA [REDACTED] presented the case to the team. The case was indicated and referred for prosecution. The case was also referred for non-custodial services. The indication included neglect death against [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/10/2013

Contact Method:

Contact Time: 09:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/12/2013

Completed date: 07/12/2013

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/12/2013 09:09 AM Entered By: [REDACTED]

Team Leader [REDACTED] is reviewing case for monthly review. Child fatality report was initiated by on call supervisor [REDACTED] and forwarded to TC for review. [REDACTED] has added additional information to the case and investigation continues into the exact cause of the death. Case will be presented to CPIT tomorrow and any prosecution will will discussed with the ADA.



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: 06:50 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 07/10/2013

Completed date: 07/10/2013

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: 07/10/2013 06:56 AM Entered By: [REDACTED]

notation:

CPSI submitted 2 PSG request for the parents [REDACTED] and [REDACTED] and [REDACTED] submit to nail bed test to get a better understanding of their drug use.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/10/2013	Contact Method:	
Contact Time:	06:30 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	07/10/2013
Completed date:	07/10/2013	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: 07/10/2013 06:32 AM Entered By: [REDACTED]

Notation:

The medical examiner's office gave CPSI a case ID- # [REDACTED] for [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/09/2013

Contact Method:

Contact Time: 06:06 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 07/09/2013

Completed date: 07/09/2013

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: 07/09/2013 06:07 PM Entered By: [REDACTED]

CPSI completed the non-custodial permanency plan in the TFACTS system.



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: 07/09/2013

Contact Method: Phone Call

Contact Time: 03:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 07/09/2013

Completed date: 07/09/2013

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: 07/09/2013 06:14 PM Entered By: [REDACTED]

CPSI called the medical examiners office in [REDACTED] to find out if the doctor had a preliminary cause of death. CPSI spoke with the medical exam, but the cause of death is still under investigation at this time. CPSI thanked the doctor for taking time to speak with CPSI.



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: 07/09/2013

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 07/09/2013

Completed date: 07/09/2013

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: 07/09/2013 06:10 PM Entered By: [REDACTED]

CPSI went to the [REDACTED] to pick up a copy of [REDACTED] medical examiners report. A copy is in the hard 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: 07/08/2013

Contact Method:

Contact Time: 09:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 07/09/2013

Completed date: 07/09/2013

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: 07/09/2013 06:09 PM Entered By: [REDACTED]

CPSI completed the safety assessment and the FAST assessment in the TFACTS system.



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: 07/08/2013 Contact Method: Face To Face
 Contact Time: 12:30 PM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 07/08/2013
 Completed date: 07/10/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Initial ACV Face To Face,ACV Interview/Observation,Alleged Perpetrator
 Interview,Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]; [REDACTED]

Participant(s)

[REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/08/2013 09:16 PM Entered By: [REDACTED]

cPSI made contact with the family after they left [REDACTED]. the mother, father, children, and grandmother came by the [REDACTED] to meet with CPSI. CPSI asked who would like to speak with CPSI first? The father [REDACTED] stated that he would go first. CPSI took [REDACTED] into a conference room to interview him alone. The first thing [REDACTED] stated to CPSI is that "[REDACTED] killed his daughter." CPSI asked [REDACTED] why he thought that [REDACTED] had killed his child? [REDACTED] stated that the child was fine until they came home and found [REDACTED] asleep with her arm over the child's face. CPSI talked with the father more about the children and then explained to him about the investigation. 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 Clients 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 along with a Genogram of the family.

CPSI took a written statement from the father in order to get a better understanding of what [REDACTED] saw when he got home from helping a family member move that afternoon. [REDACTED] asked CPSI to write the statement for him, due to his inability to write well. CPSI agreed to do so, but CPSI asked that [REDACTED] make sure CPSI wrote it exactly as he told the story. [REDACTED] agreed to do so. [REDACTED] explained getting to the home and seeing the grandmother asleep on the couch, but he did not see his child at first. [REDACTED] stated that he noticed the child's feet sticking up and the grandmother's arm covering the babies face. [REDACTED] informed CPSI that the grandmother did not even wake up until he moved her arm. [REDACTED] explained that the grandmother [REDACTED] appeared to be under the influence of something. [REDACTED] went on to explain that the grandmother appeared to be very drowsy. [REDACTED] stated that he grabbed the baby up from the couch and the child was limp and cold. [REDACTED] stated that [REDACTED] was dazed and confused. [REDACTED] stated that he screamed call 911. [REDACTED] stated that [REDACTED] came in and placed the child on the opposite couch trying to perform CPR. [REDACTED] stated that [REDACTED] told [REDACTED] that she killed her baby. [REDACTED] stated that the ambulance pulled up to the house and the paramedics took the child and placed her inside the ambulance. [REDACTED] explained that they worked on her for about 45 minutes in the ambulance in their yard. [REDACTED] stated that the paramedics informed [REDACTED] that they were taking the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

baby to the hospital and they left.

[REDACTED] stated that he also remembered that the baby had a brownish red fluid coming from the baby's mouth. [REDACTED] stated that [REDACTED] had that same fluid on her left shoulder on her shirt. CPSI thanked [REDACTED] for explaining to the CPSI what happened on the dad his daughter died. CPSI asked if [REDACTED] would be willing to submit to a urine drug screen? [REDACTED] stated that he would submit to the drug screen, but he needed to tell CPSI something before he took it. [REDACTED] stated that Xanax and marijuana would show up in his system. CPSI asked if [REDACTED] had a prescription for the Xanax. [REDACTED] stated no that he did not. CPSI asked [REDACTED] about his marijuana use. [REDACTED] explained that he only smokes marijuana every once in a while. CPSI asked TL [REDACTED] to give [REDACTED] a drug screen. [REDACTED] tested positive for THC, opiates, and benzos. CPSI asked if [REDACTED] was prescribed any medication? [REDACTED] stated yes hydrocodone for pain. [REDACTED] explained that he is disabled. [REDACTED] asked if CPSI was going to take his children from him because he tested positive for marijuana. CPSI explained that CPSI would not take his children away for testing positive for marijuana.

Interview with mother [REDACTED] alone at 2:30 PM on 7-8-2013

CPSI met with the mother [REDACTED] next to get an understanding of the events that lead up to the death of her child. [REDACTED] had several questions about the investigation and why one had to be completed. CPSI explained to [REDACTED] that any time a child dies in the State of Tennessee DCS opens an investigation to find out the cause of death and to rule out any abuse or neglect. [REDACTED] stated that she did not understand why CPSI had to talk with the family so soon. CPSI explained that in an investigation that we are looking out for the safety of the children that are still in the home as well as the child's cause of death. CPSI explained to [REDACTED] that CPSI is there to help the family with answer to questions that the family may not know and to help the family with services in order to help them get through such a difficult time in their life. [REDACTED] thanked CPSI for taking the time to explain the whole process and why it has to be done now. CPSI went over the referral with the mother. CPSI explained that these are allegations and does not mean they are true, but CPSI will investigate along with law enforcement and the Child Protective Investigative Team. CPSI explained the neglect death and that her mother is the alleged perpetrator. CPSI explained that there are allegations of drug exposed infant and child as well as environmental concerns. [REDACTED] stated that she does understand that the home does have some environmental concerns. [REDACTED] explained that they were helping a family member move in and things were everywhere. CPSI asked if [REDACTED] had any other questions for CPSI before CPSI asked [REDACTED] to write her statement of everything that happened the day of the child's death.

[REDACTED] wrote her statement as follows.

Pulled into the driveway. [REDACTED] went to get [REDACTED] out of her car seat. I told [REDACTED] that [REDACTED] was wet from spilling her cup on herself and turned to get out. That's when I heard [REDACTED] scream call 911 she's....! But I could not make out who. I thought momma fell and was hurt I guess the 1st thing that ran through my mind. On my way up the steps putting in 911 [REDACTED] was in the house jumping up and down. I looked oversaw momma holding [REDACTED] looked shocked and tears flowing. I immediately took my baby and started doing CPR the best that I could. I could hear [REDACTED] talking to 911 again and again. Momma was beside us. Helping me praying with me. I looked at her and asked her to call my friend [REDACTED] because I was freaking out. I begged my baby to wake up. As I done CPR with mom's help we started to get milk up with her chest compressions. I did not stop and EMT picked up [REDACTED] and carried her out of the house. I went outside to the ambulance to give information. Next thing I knew I was sitting in a chair and someone said she's going to [REDACTED] I looked to check for my two girls. when I saw they were safe and okay [REDACTED] said let's go I'm loading the girls. then [REDACTED] mom pulls up and I go inside to my mom so we can get to hospital. My mom was in tears and alone and about to pass out it looked llike. She asked me if [REDACTED] was breathing. I looked at her I said I know nothing. But mama please calm down I feel like I lost my baby. I can't lose you to. So I told my mom to come on then they tell my mom that she can't leave. Hurt, worried, pained, and confused I told my mom we loved her and would let her know how she was when we got there. Gave mom a kiss and told her not to blame herself. And to please keep calm as she can. I love you mama and then I walked out the door to get into the car. And we went toward [REDACTED] so I could get to [REDACTED] [REDACTED] signed, dated, put the time and wrote this a true accurate statement.

CPSI asked if [REDACTED] would submit to a urine drug screen. [REDACTED] agreed to submit. [REDACTED] urine drug screen came back positive for opiates. CPSI asked if [REDACTED] has a prescription for opiates? [REDACTED] stated yes that she takes pain medication. [REDACTED] signed a release of information, so CPSI could get a copy of her medication records from Vise's pharmacy. CPSI and [REDACTED] discussed the parents and children going for a mental health intake to seek counseling to deal with the grief of losing a child or sibling. [REDACTED] agreed that the family would complete this step. CPSI explained to [REDACTED] at this time her mother [REDACTED] could have no unsupervised contact with [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

and [REDACTED] due to the allegations. [REDACTED] cried. CPSI explained that CPSI has to ensure the children's safety at this time. [REDACTED] agreed to do whatever was needed to get the investigation over with.

July 8, 2013 3:15 PM Interview with the alleged perpetrator [REDACTED]:

CPSI took [REDACTED] into the conference room to complete the interview alone. CPSI explained that DCS had received a referral that alleged that [REDACTED] died due to neglect death and that [REDACTED] is the alleged perpetrator. [REDACTED] started to cry. CPSI explained to [REDACTED] that these are only allegations and have not been proven to be true and accurate. CPSI also explained that the investigation is also for drug exposed infant, because someone felt that [REDACTED]'s drug use could have been the cause of the child's death. [REDACTED] just dropped her head and stated "that she wished God would have taken her instead of [REDACTED] CPSI asked if [REDACTED] would sign a release of information, so CPSI could get [REDACTED]'s medical history, background check, and a pharmacy check. [REDACTED] completed the release and stated that she would cooperate in any way she could. CPSI thanked [REDACTED] for cooperating at such a tough time in her life. CPSI explained that CPSI needed [REDACTED] to write a statement about the day [REDACTED] died anything she remembers, heard, or saw.

[REDACTED]'s statement reads:

I [REDACTED] was watching my grandbaby [REDACTED]. She drank a bottle of milk and went to sleep. I burped her. I don't like laying her down on the sofa for a long time, so I made a palot in the floor. She slept for a long time. [REDACTED] and [REDACTED] came and stated that they needed to get another load. [REDACTED] stated that when she wakes up that she will be hungry. When she woke up we played a little bit then she went to whining so I fixed her a bottle. We got on the love seat and something funny was on TV I feed her the bottle and I laid down on the love seat with her. She burped and laughed. she thought it was funny. then I dozed off and so did she. that is when she passed away.

[REDACTED] signed the statement and put the time on it.

CPSI asked if [REDACTED] would submit to a urine drug screen. [REDACTED] submitted to the drug screen and tested positive for methamphetamines, benzos, and opiates. CPSI asked [REDACTED] about her medication. [REDACTED] gave CPSI permission to contact her pharmacy to get a copy of her medications. CPSI asked if [REDACTED] has used methamphetamines. [REDACTED] stated no. CPSI explained that [REDACTED] tested positive for meth. [REDACTED] appeared to be unconcerned. CPSI explained at this time [REDACTED] could no longer have unsupervised visitation with the children. [REDACTED] asked if she could watch the child at all? CPSI explained no, not at this time. CPSI explained that someone has to be with her at all times when she is around the children. [REDACTED] started to cry. CPSI gave [REDACTED] the phone number to [REDACTED] and encouraged [REDACTED] to call them if she felt like she needed to talk. CPSI asked if [REDACTED] was homicidal or suicidal? [REDACTED] stated no. CPSI explained that at any point she does feel that way to contact crisis right away. CPSI encouraged [REDACTED] to call her counselor and get an appointment right away. [REDACTED] put her head down and cried. [REDACTED] stated that she does not even take her medication when the children are around. CPSI thanked [REDACTED] for cooperating with CPSI during such a difficult time. [REDACTED] got up and hugged CPSI and thanked CPSI for helping her. CPSI gave [REDACTED] CPSI's phone numbers in case she needed anything at all.

CPSI interview with [REDACTED] 4 years old. [REDACTED] was happy and laughing. [REDACTED] did not say anything at all about the death of her sister. CPSI played with [REDACTED] and got her a snack. [REDACTED] appeared healthy and well adjusted.

CPSI observed [REDACTED] asleep. [REDACTED] appeared to be healthy.

Please note the non-custodial plan that was completed with the family on 7-8-2013 in the permanency plan tab.



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: 07/08/2013 Contact Method: Face To Face
 Contact Time: 11:41 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 07/09/2013
 Completed date: 07/09/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Other Persons Living in Home Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/09/2013 03:59 PM Entered By: [REDACTED]

Child fatality [REDACTED]

Home visit

7-8-2013

11:41 AM

CPSI [REDACTED] went to the family home at [REDACTED] in [REDACTED]. CPSI arrived at the home and there was a truck parked in the driveway. CPSI noted that the outside of the family home was run down and very cluttered with toys, animals, and garbage. CPSI noted that the window unit air conditioner was running. CPSI knocked on the door several times before a gentleman came to the door. CPSI asked if [REDACTED], [REDACTED], or [REDACTED] was home. The gentleman stated no that he thought they might be at the funeral home. CPSI asked if the gentleman lived in the home? The gentleman stated that he was staying with the family for a little while until he could find a place to live. CPSI asked the gentleman what his name is. The gentleman stated [REDACTED]. CPSI asked if he is related to the family? [REDACTED] explained that he is [REDACTED]'s cousin. CPSI explained who CPSI is and why CPSI was at the home. CPSI asked who lives in the home? [REDACTED] stated [REDACTED] (grandmother to the children), [REDACTED] (mother to the children), [REDACTED] (father to the children), [REDACTED] (child), and [REDACTED] (child). [REDACTED] stated that the baby did live in the home as well, but she died on Saturday. CPSI asked if [REDACTED] was at the home when the child died? [REDACTED] stated no, but he came into the home at the same time the father did. CPSI asked him to explain the events as they happened when they approached the home. [REDACTED] stated, [REDACTED] and himself came to the door and they noticed the grandmother asleep on the couch. [REDACTED] stated that [REDACTED] asked where is my baby? [REDACTED] stated that at about the same time [REDACTED] and [REDACTED] noticed the child's feet sticking out and [REDACTED]'s arm was over the baby's face. [REDACTED] stated that [REDACTED] noticed the baby being a bluish color. [REDACTED] stated that [REDACTED] ran over and lifted [REDACTED]'s arm off the baby's face and they could see the baby was not moving. [REDACTED] stated that [REDACTED] picked the baby up and was screaming call 911 my baby is dead, my baby is dead. [REDACTED] stated that [REDACTED] was hysterical at this time. [REDACTED] stated that he went to the door and screamed for [REDACTED] to call 911. [REDACTED] stated [REDACTED] came into the house and [REDACTED] was screaming my baby is not breathing. [REDACTED] stated that [REDACTED] placed the child on the couch and [REDACTED] tried to do CPR. CPSI asked [REDACTED] what grandmother ([REDACTED]) was doing at the time? [REDACTED] stated that the grandmother stayed on the couch and was somewhat unresponsive until after the baby was moved. [REDACTED] stated that the grandmother appeared to be confused. CPSI asked if the grandmother has any medical conditions. [REDACTED] stated yes, but he did not know in detail what they were. [REDACTED] stated that her blood sugar level has dropped before, but only once that he knew of.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPSI asked if the grandmother is on medication? [REDACTED] stated yes, but he did not know what all she took. CPSI asked where [REDACTED] and [REDACTED] had been staying? [REDACTED] stated that they had been staying in a motel. [REDACTED] stated that they were at [REDACTED] funeral home at the time he thought. CPSI asked if the family had the money to pay for a burial for the child? [REDACTED] stated no that it would be a huge financial burden. CPSI asked how [REDACTED] the grandmother was holding up? [REDACTED] stated pretty good. CPSI asked if [REDACTED] was homicidal or suicidal? [REDACTED] stated no.

CPSI asked if [REDACTED] would be willing to show CPSI the exact way the baby and the grandmother were on the couch when they arrived home. [REDACTED] stated that would be fine. CPSI asked if [REDACTED] would allow CPSI to take pictures, so CPSI could get a better understanding of exactly what they saw when they arrived. [REDACTED] stated that would be fine. CPSI and [REDACTED] decided to use a stuffed bear to be the baby and [REDACTED] laid exactly like the grandmother was lying on the couch. CPSI took pictures. CPSI asked if [REDACTED] would be willing to give CPSI a written statement of exactly what happened on the day of the incident. [REDACTED] stated that he would give the written stated, but asked if CPSI would write it for him due to him not being able to write very well. CPSI agreed to write the statement, but wanted him to make sure CPSI got everything in the statement right. [REDACTED] told the story again and CPSI hand wrote the statement. CPSI read the statement back to [REDACTED] and [REDACTED] signed, dated, and wrote the time on it. The hand written statement is in the hard file.

CPSI got the phone numbers for [REDACTED] which is [REDACTED] and a phone number for [REDACTED] and [REDACTED] which is [REDACTED]. CPSI left CPSI phone number for the family in case they needed anything at all. CPSI also left the phone number for [REDACTED] in case anyone needed to talk to a counselor at any time day or night. CPSI thanked [REDACTED] for being so cooperative and answering so many questions as well as given the written statement. CPSI informed [REDACTED] that CPSI would call [REDACTED], [REDACTED], and [REDACTED] to set up an appointment to see them.



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:	07/08/2013	Contact Method:	Attempted Face To Face
Contact Time:	11:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/09/2013
Completed date:	08/09/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Initial ACV Face To Face		
Contact Sub Type:			

Children Concerning

[REDACTED]

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/09/2013 05:18 PM Entered By: [REDACTED]

The child [REDACTED] was decease before CPS! [REDACTED] became involved.



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:	07/08/2013	Contact Method:	Face To Face
Contact Time:	10:30 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	07/08/2013
Completed date:	07/09/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/08/2013 09:23 PM Entered By: [REDACTED]

CPSI met with the referent to discuss the case and discuss next steps.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/07/2013	Contact Method:	Face To Face
Contact Time:	04:30 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:	Family Home	Created Date:	08/09/2013
Completed date:	08/09/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview, Notation		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/09/2013 05:22 PM Entered By: [REDACTED]
 [REDACTED] CPS Assessment made first response; CPS Investigator [REDACTED] did not get the case until 07/08/13
 These are the notes of [REDACTED].
 [REDACTED] on [REDACTED] case

Home visit on 07/7/2010 @4:30 p.m.

Assessment worker went to the home to the home on today to meet with parents and grandparents. Assessment worker requested for sheriff assistance, before going to the home alone on Sunday. Assessment worker and officer were greeted at the door by a man. He stated that he was [REDACTED]'s cousin, [REDACTED]. He invited AW and officer in the home. Assessment worker observed [REDACTED] on the loveseat sitting down. Assessment worker introduce self and explained the reason for the visit. Assessment worker stated to [REDACTED] about her lose. [REDACTED] appeared to be under the influence of something. Assessment worker asked [REDACTED] was she medicated. He stated yes, she has had a Xanax on today. Assessment worker asked him how many. [REDACTED] stated that they gave her one on this morning. Assessment worker engage with [REDACTED] about her loss before going into detail on what happened on yesterday. She stated that she felt like it should have been her instead of her grandbaby.
 She stated yesterday, [REDACTED], father, and [REDACTED], mother left the home to help someone move. She stated that she was left there with [REDACTED] there with her. She stated made a pallet and laid [REDACTED] the floor for a min. She stated that she began to get fussy, so she gave her a bottle on the loveseat. She stated that she most of doze off when giving her a bottle. [REDACTED] stated that she wish she could go back.
 Assessment worker asked [REDACTED] about the other children. She stated that they were with [REDACTED]'s best friend [REDACTED]. Assessment worker asked [REDACTED] did she take medicine the afternoon. She stated no, she stated her Xanax at night and take her other medicine as prescribe to her. Assessment worker asked could she have a list of her medicine. [REDACTED] is prescribed by her medical doctor along with mental health provider a total of 22 medicines. Assessment worker made a list of them. Assessment worker will also call the local pharmacy for a report for the most recent medicine. Assessment worker made list of all medicine except the Xanax. [REDACTED] stated that one of the family members took her meds. Due to possible taking too many.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/06/2013	Contact Method:	
Contact Time:	09:38 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	07/10/2013
Completed date:	07/10/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/10/2013 06:38 AM Entered By: [REDACTED]

Case summary:

Family Case IDs: [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Indicated None

Fatality No

Screened out 1

History (not listed above):

18470413/PYA/10.07.2011/[REDACTED] and [REDACTED]/Services Recommended and Accepted

Reporter states:

[REDACTED] (6 mos.) lives with her mother and father, [REDACTED] and [REDACTED]. There are two other children in the home. The names and ages are unknown at this time. The grandmother [REDACTED] resides with the family.

The two older children and the parents were helping another family member move in [REDACTED]. When they returned home this evening (07/06/2013), [REDACTED] walked in first, and observed [REDACTED] asleep on the loveseat. He then saw [REDACTED]'s feet sticking out from underneath the grandmother. The grandmother is reported to be very heavy. [REDACTED] reported she had fallen asleep while feeding [REDACTED] a bottle. While at the hospital [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

requested that [REDACTED] be drug tested; he stated that she is on Xanax. [REDACTED] reportedly has a prescription for Xanax.

The autopsy is pending at this time . The older children are currently with the parents. They are believed to be safe. The assistant district attorney may charge [REDACTED] with negligent manslaughter. At the hospital, [REDACTED] appeared to be well nourished and well taken care of. There were no obvious signs of abuse.

The home where the family lives was described as nasty. There was clutter including old clothes, trash, and junk, but nothing hazardous.

There is a long history of domestic disputes between the parents . It was reported [REDACTED] has been in jail for domestic dispute. It was reported [REDACTED] attempted to hang himself in the past.

No special needs or disabilities are known.

Per SDM: Investigative Track, P1

TL [REDACTED] was the on call supervisor. The on-call assessment worker was [REDACTED].

CPSI [REDACTED] received the case on 7-8-2013. CPSI upon receiving the case met with the referent and then completed all interviews with written statements.



Family Functional Assessment

Case Name: _____ Case ID: _____
 Primary Case Worker: _____ Begin Date: 07/08/2013
 Last Review By: _____ Last Review Date: _____

I. Current Circumstances:

A. Reason For Involvement:

07/08/2013 - _____ - FFA - Family - cPSI received a referral alleging neglect death, drug exposed infant and child, and environmental neglect.

B. Family Story:

II. Assessment of Family Strengths and Needs/Risks:

A. Family Significant Strengths:

07/08/2013 - _____ - FFA - Family - The parents _____ and _____ are cooperating with CPSI.

B. Family Significant Needs/Risks/Concerns:

07/08/2013 - _____ - FFA - Family - The child _____ age 6 months old died on July 6, 2013, while in the care of her grandmother _____. The circumstances around her death are suspicious. The grandmother tested positive for on a urine drug screen on July 8, 2013 for methamphetamine, opiates, and benzodiazepines. The father _____ tested positive on a urine drug screen on July 8, 2013 for benzodiazepines no prescription for, opiates, and marijuana. The family has a history of domestic violence. The parents need help with environmentally concerns.

III. Person Information:

A. Children:

12/30/2013 - _____ - FAST - _____ - No known concerns.

12/30/2013 - _____ - FAST - _____ - No known concerns. _____ is also attending _____ for counseling.

B. Adults:

12/30/2013 - _____ - FAST - _____ - _____ is currently dealing with the loss of a child and is currently attending counseling at _____ in _____.

12/30/2013 - _____ M - FAST - _____ - _____ is currently dealing with the loss of a child and is currently attending counseling at _____ in _____.

C. Family Together History:

12/30/2013 - _____ - FAST - _____ - No known concerns.

12/30/2013 - [REDACTED] - FAST - [REDACTED] - The family has been struggling with a child death. The grandmother ([REDACTED]) accidentally smothered the child ([REDACTED]) while sleeping on the couch. The family has made progress with communication and depression through counseling at [REDACTED] in [REDACTED]. FSW has noticed cockroaches in the home.

D. Other Significant Relationships:

E. Legal/Court/DCS History:

Intake ID	Decision Date / Time	Intake Type	Investigation ID/ Assessment ID
[REDACTED]	02/13/2009 03:08 PM	CPS	[REDACTED]
[REDACTED]	08/12/2010 06:49 PM	CPS	[REDACTED]
[REDACTED]		CPS	[REDACTED]

Action Date	Action Category	Action Type	Court Docket #	Action Concerning	Additional Info
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07/08/2013 - [REDACTED] - FFA - Family - The parents have a past history with DCS over domestic violence.

The father [REDACTED]. Is on the sex offender registry

IV. Assessment of Safety:

10/12/2010 - [REDACTED] - Safety - [REDACTED] -

07/08/2013 - [REDACTED] - Safety - [REDACTED], [REDACTED], [REDACTED], [REDACTED], [REDACTED], [REDACTED] - The child [REDACTED] died and the circumstances around her death has caused concern. The family has a history of domestic violence.

V. Assessment of Well Being:

VI. Assessment of Permanence:

11/26/2013 - [REDACTED] - FFA - Family - 10/1/13- Case transferred to FSS.

VII. Assessment of Resources:

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	WORKCARE RESOURCES [REDACTED]	07/10/2013	07/31/2013
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	WORKCARE RESOURCES [REDACTED]	07/10/2013	07/31/2013
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	WORKCARE RESOURCES [REDACTED]	10/01/2013	10/31/2013
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	WORKCARE RESOURCES [REDACTED]	10/01/2013	10/31/2013
[REDACTED]	Support Services/ Family Support Services	Approved	Department of Children Services	10/01/2013	

Worker's Signature

Date

Supervisor's Signature

Date



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker: [Redacted]

Date of Referral: 7/6/13 8:41 PM

Date of Assessment: 7/8/13 12:00 AM

Assessment Type: [X] 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.
- [X] Death of a child due to abuse or neglect.
- [] Care taker fears that s/he will maltreat the child.
- [] Threat to cause harm or retaliate against the child.
- [] Excessive discipline or physical force.
- [] Drug-affected infant/child.
- [] Methamphetamine lab exposure.
2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
4. Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.
5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
9. Domestic violence exists in the home and poses a risk of serious physical and/or emotional harm to the child.



Tennessee Department of Children's Services

SDM™ Safety Assessment

- 10. Caretaker describes the child in predominantly negative terms or acts toward the child in negative ways that result in the child being a danger to self or others, acting out aggressively, or being severely withdrawn and/or suicidal.
- 11. Caretaker's emotional stability, developmental status, or cognitive deficiency seriously impairs his/her current ability to supervise, protect, or care for the child.
- 12. There is a pattern of prior investigations and/or behavior that suggests an escalating threat to child safety.
- 13. Other (specify)

If no immediate harm factors are observed, proceed to Section 3

Section 2: Safety Interventions

If no immediate harm factors are present, go to Section 3. If one or more immediate harm factors are present, consider whether safety interventions one through eight will allow the child to remain in the home for the present time. Check the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by checking item nine or ten, and follow procedures for initiating a voluntary agreement or taking the child into protective custody. Mark all that apply:

Non-Protective Custody Interventions:

- 1. Intervention or direct services by worker as part of a safety plan.
- 2. Use of family, neighbors, or other individuals in the community as safety resources.
- 3. Use of community agencies or services as immediate safety resources.
- 4. Have caretaker appropriately protect the victim from the alleged perpetrator.
- 5. Have the alleged perpetrator leave the home, either voluntarily or in response to legal action.
- 6. Have the non-offending caretaker move to a safe environment with the child.
- 7. Legal action planned or initiated - child remains in the home.
- 8. Other (Specify): _____

Protective Custody Interventions:

- 9. Caretaker signs a voluntary placement agreement that places the child in Department of Children Services (DCS) custody.
- 10. Child placed in protective custody pursuant to 37-1-113 and 37-1-117 because no interventions are available to adequately ensure the child's safety.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Section 3: Safety Decision

Identify the safety decision. This decision should be based on the assessment of all immediate harm factors, safety interventions, and any other information known about the family. Mark only one.

- 1. Safe. No immediate harm factors were identified at this time. Based on currently available information, there are no children likely to be in immediate danger of serious harm.
2. Conditionally Safe. One or more immediate harm factors are present, and one or more protecting interventions #1-8 have been planned or taken. Based on protecting interventions, no protective custody action is necessary at this time.
3. Unsafe. One or more immediate harm factors are present, and placement is the only protecting intervention (#9 or #10) possible for one or more children. Without placement, one or more children will likely be in danger of immediate or serious harm.
[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: _____