



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 07/11/2013 09:00 AM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 07/11/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 07/11/2013 10:42 AM
First Team Leader Assigned: [REDACTED] Date/Time 07/11/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 07/11/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 1 Mos	Lack of Supervision	Yes	[REDACTED]	Other Non-relative

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]

Referent Address: [REDACTED]

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: Letter

Narrative: TFACTS:
Family ID: [REDACTED]
Open Court Custody/FSS/FCIP No
Closed Court Custody No
Open CPS - 2/14/13, # [REDACTED] DEC, CM [REDACTED]
Indicated No
Fatality No
Screened out None or Total number of screen outs - 3
History (not listed above):
6/25/13, # [REDACTED] DEI, Unfounded
Closed FCIP: # [REDACTED] 4/12/07-5/17/07

DUPLICATE REFERRAL: No

County: [REDACTED]



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

Notification: Letter
School/ Daycare: Unknown
Native American Descent: Unknown
Directions: None

Reporters name/relationship: [REDACTED]

Reporter states: [REDACTED] (2) and [REDACTED] (3 months) reside with their mother [REDACTED] in addition to family friends, [REDACTED] boyfriend, [REDACTED] and [REDACTED] daughter, [REDACTED] (21).

On 07/10/2013 around 9:34pm [REDACTED] contacted 911 due to [REDACTED] finding [REDACTED] unresponsive in her bed. While [REDACTED] was on the phone [REDACTED] was performing CPR on [REDACTED] after [REDACTED] failed attempts. [REDACTED] reported that she fed [REDACTED] a bottle of formula then laid him down in her bed (stomach down) and put blankets around him. [REDACTED] said she placed the blankets so [REDACTED] would not fall off the bed and then she went outside to smoke a cigarette (gone about 10-15 minutes) and when she returned [REDACTED] was face down on his stomach.

[REDACTED] was transported to [REDACTED] Childrens Hospital, but during the transport EMS called LE to report that [REDACTED] was still unresponsive. [REDACTED] is currently in the NICU at [REDACTED] Childrens Hospital and medical staff (Dr. [REDACTED] report that [REDACTED] chest X-Rays were clear, but there are some signs of brain injuries but no bleeding.

The mother and [REDACTED] were not in the home during the time of incident and [REDACTED] was left to care for [REDACTED] It was reported that [REDACTED] can roll from his stomach to his back but not his back to his stomach.

It is unknown if [REDACTED] had any bruises on his body, photographs of [REDACTED] may have been taken, but photographs were taken of the home. The referent was not present in the familys home so they cannot comment on the conditions.

The referent states that LE contacted DCS and the case was assigned to [REDACTED] [REDACTED] [REDACTED] the mother and the mothers friend, [REDACTED] were interviewed at the hospital. [REDACTED] did not come to the hospital, but he was interviewed by Violent Crimes Unit at the home.

It is unknown if the children have any special needs or disabilities. In the past two weeks both children have been seen by their pediatrician for sinus infections and were giving medication for treatment.

The familys address is listed under the oldest child in the home.

Per SDM: P1-Investigation

[REDACTED] CM2 07-11-2013 9:37am

[REDACTED] CM3.

County Notified at 10:03 am CST on 7/11/13.

Child Fatalities Group (CI Director [REDACTED]

[REDACTED] notified at 10:04 am CST on 7/11/13.



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

Participant(s)

Name: [REDACTED]
Gender: Female **Date of Birth:** [REDACTED] **Participant ID:** [REDACTED]
SSN: **Race:** White **Age:** 44 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:** 22 Yrs
Address:
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: No
DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN:

Race: White

Age: 3 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN:

Race:

Age: 1 Yr 1 Mos

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 21 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: Male

Date of Birth:

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 07/11/2013

Assignment Date: 07/11/2013

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]	Drug Exposed Child	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
2	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
3	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED]
4	[REDACTED]	[REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED]

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: AUPU for Neglect Death and Lack of Supervision against Ms. [REDACTED] ASPS for Drug Exposed Infant and Child against Ms. [REDACTED]

D. Case Workers

Case Worker: [REDACTED]

Date: 03/18/2014

Team Leader: [REDACTED]

Date: 03/18/2014

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:

[REDACTED] was observed on 7/10/13. At that time, he was unconscious and on a ventilator. [REDACTED] later died on 7/15/13.



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

Case Name : ██████████

Investigation ID: ██████████

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

██████████ mother, ██████████ reported that she had left ██████████ with family friend, ██████████ for the day because she was in ██████████ trying to move the rest of her belongings to ██████████ home. ██████████ reported that when she was home, ██████████ slept in a crib in her room. She reported that she was on her way to ██████████ home when she received the call that ██████████ was being rushed to ██████████. ██████████ reported that she arrived at the home as EMTs were trying to revive ██████████. ██████████ reported that she did not give ██████████ any specific instructions regarding ██████████ sleeping arrangements. ██████████ tested positive for Amphetamines, Methamphetamines, Opiates, and Oxycodone at the time of the interview. ██████████ admitted to using a Roxicodone early that day, and to allowing her uncle to inject her with an unknown substance which she believed to be Methamphetamine. ██████████ also disclosed that she had the children with her at those times. Because of this, ██████████ oldest child, ██████████ was placed in the custody of maternal grandmother, ██████████.

The final autopsy report indicates that unsafe sleep was a probable cause of his death, but that the manner of death is undetermined.

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

██████████ reported that she was watching ██████████ on this date because ██████████ was in ██████████ trying to move the rest of her belongings to her home. ██████████ reported that ██████████ usually slept in a crib in ██████████ room; however, she did not feel comfortable with him being in a room by himself since ██████████ was not home. ██████████ reported that she put ██████████ to sleep in her bed and went outside to smoke a cigarette. She stated that she came back into the home and took her medications and brushed her teeth. ██████████ reported that she only left ██████████ alone for approximately 15 minutes. She reported that once she found him, he was cold and blue. ██████████ contacted 911 and the family began CPR on ██████████.

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

██████████ (2) and ██████████ (3 months) reside with their mother, ██████████ in addition to family friends, ██████████, ██████████ boyfriend, ██████████ and ██████████ daughter, ██████████ (21). On 07/10/2013 around 9:34pm ██████████ contacted 911 due to ██████████ finding ██████████ unresponsive in her bed. While ██████████ was on the phone ██████████ was performing CPR on ██████████ after ██████████ failed attempts ██████████ reported that she fed ██████████ a bottle of formula then laid him down in her bed (stomach down) and put blankets around him. ██████████ said she placed the blankets so ██████████ would not fall off the bed and then she went outside to smoke a cigarette (gone about 10-15 minutes) and when she returned ██████████ was face down on his stomach. ██████████ was transported to ██████████ Childrens Hospital, but during the transport EMS called LE to report that ██████████ was still unresponsive. ██████████ is currently in the NICU at ██████████ Childrens Hospital and medical staff (Dr. ██████████) report that ██████████ chest X-Rays were clear, but there are some signs of brain injuries but no bleeding.

The mother and ██████████ were not in the home during the time of incident and ██████████ was left to care for ██████████. It was reported that ██████████ can roll from his stomach to his back but not his back to his stomach.

It is unknown if ██████████ had any bruises on his body, photographs of ██████████ may have been taken, but photographs were taken of the home. The referent was not present in the family's home so they cannot comment on the conditions. The referent states that LE contacted DCS and the case was assigned to ██████████, ██████████, ██████████ the mother and the mother's friend, ██████████ were interviewed at the hospital. ██████████ did not come to the hospital, but he was interviewed by Violent Crimes Unit at the home. It is unknown if the children have any special needs or disabilities. In the past two weeks both children have been seen by their pediatrician for sinus infections and were giving medication for treatment.

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



**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]

This case came to the attention of the Department on 7/10/14 with allegations of lack of supervision (severe). It was alleged that [REDACTED] family friend of [REDACTED] was watching Ms. [REDACTED] infant child, [REDACTED] who was found unresponsive. [REDACTED] later died on 7/15/13, so the allegation of neglect death was added as an allegation. Upon further investigation it was learned THAT [REDACTED] death was associated with unsafe sleeping; however, it could not be proven that Ms. [REDACTED] had any safe sleep knowledge or education. Ms. [REDACTED] has an older child [REDACTED] who is now in the custody of his maternal grandmother, [REDACTED] due to Ms. [REDACTED] drug use. This case is closed as Allegations Unsubstantiated Perpetrator Unsubstantiated for the Neglect Death and Lack of Supervision; however, the Drug Exposed Child/Infant allegations against Ms. [REDACTED] are being Substantiated.

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: 03/17/2014

Contact Method:

Contact Time: 09:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/17/2014

Completed date: 03/17/2014

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: 03/17/2014 09:46 AM Entered By: [REDACTED]

This case came to the attention of the Department on 7/10/14 with allegations of lack of supervision (severe). It was alleged that [REDACTED] family friend of [REDACTED] was watching Ms. [REDACTED] infant child, [REDACTED] who was found unresponsive. [REDACTED] later died on 7/15/13, so the allegation of neglect death was added as an allegation. Upon further investigation it was learned THAT [REDACTED] death was associated with unsafe sleeping; however, it could not be proven that Ms. [REDACTED] had any safe sleep knowledge or education. Ms. [REDACTED] has an older child, [REDACTED] who is now in the custody of his maternal grandmother, [REDACTED] due to Ms. [REDACTED] drug use. This case is closed as Allegations Unsubstantiated Perpetrator Unsubstantiated.

A copy of the 740 will be sent to [REDACTED] County Juvenile Court/Judge by regional protocol.

Narrative Type: Addendum 1 Entry Date/Time: 03/17/2014 10:58 AM Entered By: [REDACTED]

The allegations of Drug Exposed Infant and Child (non severe) were later added to this case based on Ms. [REDACTED] positive drug screen, and her admission to snorting Roxycodone while [REDACTED] was in her care. Ms. [REDACTED] also admitted to being injected with a substance she believed to be Methamphetamine while [REDACTED] was in her car. Ms. [REDACTED] later stated that [REDACTED] was not in her care; however, the time line she originally provided supports the original claim that [REDACTED] was in her care at the time. These allegations are not being added in regards to the death 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: Completed

Contact Date: 03/14/2014

Contact Method: Phone Call

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/17/2014

Completed date: 03/17/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/17/2014 09:46 AM Entered By: [REDACTED]

3/14/14 CPSI [REDACTED] and PC [REDACTED] spoke to DCS Legal [REDACTED] regarding this case. Mr. [REDACTED] had expressed concerns regarding this case being closed unsubstantiated after it was presented to CPIT. During this conversation, it was agreed that there was no way to conclusively prove that Ms. [REDACTED] had any safe sleep education, as she does not have young children herself. It was also determined that there was no indication that Ms. [REDACTED] had given Ms. [REDACTED] specific instructions regarding [REDACTED] sleep. Based on these facts, Mr. [REDACTED] reported that he was in agreement with this case being closed unsubstantiated.



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:	03/13/2014	Contact Method:	
Contact Time:	09:10 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	03/13/2014
Completed date:	03/14/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 03/13/2014 08:47 PM Entered By: [REDACTED]

ADMINISTRATIVE REVIEW/ CASE STAFFING

This case was staffed on this date by Lead Investigator [REDACTED] and Investigator [REDACTED]

The child involved is [REDACTED] (deceased). [REDACTED] (other involved adult). The allegations are lack of supervision and neglect death.

The referral states that [REDACTED] (2) and [REDACTED] (3 months) reside with their mother, [REDACTED] in addition to family friends, [REDACTED] boyfriend, [REDACTED] and [REDACTED] daughter, [REDACTED] (21).

On 07/10/2013 around 9:34pm [REDACTED] contacted 911 due to [REDACTED] finding [REDACTED] unresponsive in her bed. [REDACTED] was transported to [REDACTED] Childrens Hospital, but during the transport EMS called LE to report that [REDACTED] was still unresponsive. [REDACTED] is currently in the NICU at [REDACTED] Childrens Hospital and medical staff report that [REDACTED] chest X-Rays were clear, but there are some signs of brain injuries but no bleeding. The mother and [REDACTED] were not in the home during the time of incident and [REDACTED] was left to care for [REDACTED]. It was reported that [REDACTED] can roll from his stomach to his back but not his back to his stomach.

Investigator follow-up:

All household members have been interviewed and all tasks have been completed. The case was already presented to CPIT team and the team agreed to unsubstantiate. The case is still open because DCS attorney [REDACTED] signed the CPIT form but not agree with the classification and believes the grandmother should be substantiated for neglect. The problem is that there has not been a way to prove that the grandmother was intentionally and knowingly neglectful.

NEXT STEPS:

A follow-up conversation will be held with [REDACTED] and if he is now in agreement, the case will be closed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 03/14/2014 02:46 PM Entered By: [REDACTED]

Program Coordinator and Investigator [REDACTED] did consult with [REDACTED] on this date and he is in agreement with the CPIT classification and this case is being closed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/15/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/17/2014

Completed date: 03/17/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/17/2014 09:45 AM Entered By: [REDACTED]

1/15/14 CPIT Classification Meeting: This case was presented to Child Protective Investigative Team for classification. It was determined that the case is Unsubstantiated.



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:	10/15/2013	Contact Method:	Face To Face
Contact Time:	11:50 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Court	Created Date:	10/21/2013
Completed date:	10/21/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Court Hearing		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/21/2013 10:28 AM Entered By: [REDACTED]

10/15/13 11:50 a.m. ct. [REDACTED]

The following people were present at the hearing:

- [REDACTED] (Ms. [REDACTED] attorney)
- [REDACTED] (Mr. [REDACTED] attorney)
- [REDACTED] (GAL)
- [REDACTED] (Court Worker)
- [REDACTED] Magistrate

Today's court date was a final court date due to the parents incarceration. It was ordered that [REDACTED] remain in the custody of [REDACTED] and that the parents have supervised visitation if deemed appropriate. It was ordered that while the parents are incarcerated [REDACTED] does not have to take [REDACTED] to jail for visits.

Mr. [REDACTED] is incarcerated in [REDACTED] for a methamphetamine charge, as well as an underlying VOP. This was described as a technical charge. Mr. [REDACTED] is supposedly receiving an 8 year sentence, but will be out in April 2014. Upon his release, he is to go to a half way house for 6 months then finish his probation.

Ms. [REDACTED] is currently incarcerated for a theft charge and her next hearing for that is 11/15/13. [REDACTED] reported that she is willing to supervise both parents upon their releases from jail. It was ordered that all visitation with the parents be supervised, with them being in sight and in hearing distance at all times. It was ordered that [REDACTED] was allowed to have a 3rd party designee supervise if she was comfortable with that, but that the designee would have to ensure constant supervision. It was ordered that [REDACTED] did not have to allow visitation if the parents appeared to be intoxicated. Furthermore, the visitations do not have to occur in [REDACTED] home.

It was ordered that Ms. [REDACTED] start A&D treatment over upon her release. She reports that she has had one Vivitrol



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

shot. It was ordered that both parents resolve their current criminal histories and be compliant with probation. Mr. [REDACTED] was ordered to complete an A&D assessment and follow recommendations. It was ordered that before the parents could file a modification petition, they must present a negative 90 day hair follicle test to the court.



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:	10/14/2013	Contact Method:	Phone Call
Contact Time:	09:00 AM	Contact Duration:	Less than 01 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	10/21/2013
Completed date:	10/21/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/21/2013 10:27 AM Entered By: [REDACTED]
 10/14/13 9:06 a.m. TC to [REDACTED]
 Ms. [REDACTED] stated that [REDACTED] went to his Child Find evaluation, but he was not recommended for any follow up. Ms. [REDACTED] emailed the results to CM. Ms. [REDACTED] stated that [REDACTED] contacted her yesterday and she got the two [REDACTED] mixed up, so Ms. [REDACTED] thought that she was letting Ms. [REDACTED] see [REDACTED]. She stated that it has been straightened out now. Ms. [REDACTED] stated that [REDACTED] was still incarcerated.

10/14/13 9:15 a.m. TC to [REDACTED] (Health)
 Ms. [REDACTED] stated that Ms. [REDACTED] did not complete her program. She stated that Ms. [REDACTED] came on her final date and would not take a drug screen because she said she was sick. She stated that Ms. [REDACTED] went home early from the program. Ms. [REDACTED] stated that Ms. [REDACTED] came to group on 9/19/13 and was arrested that day. She stated that she discharged Ms. [REDACTED] to [REDACTED] Sherriffs Department on 9/20/13. Ms. [REDACTED] stated that Ms. [REDACTED] was supposed to graduate on 9/19/13. Ms. [REDACTED] stated that Ms. [REDACTED] had been passing drug screens, but she feels that Ms. [REDACTED] knew that she was about to graduate and did not think that she was going to be tested. She stated that she thinks that Ms. [REDACTED] started using again the week she was arrested.

10/14/13 9:25 a.m. TC to [REDACTED] (Probation)
 Ms. [REDACTED] stated that Ms. [REDACTED] violated her probation and picked up new charges on 9/20/13. She stated that she is not sure how long Ms. [REDACTED] will be incarcerated, but CM could contact the CID Department in [REDACTED].



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

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

Case Recording Details

Recording ID: ██████████	Status: Completed
Contact Date: 09/26/2013	Contact Method: Face To Face
Contact Time: 06:15 PM	Contact Duration: Less than 45
Entered By: ██████████	Recorded For:
Location: Family Home	Created Date: 10/01/2013
Completed date: 10/01/2013	Completed By: ██████████
Purpose(s): Safety - Child/Community, Service Planning	
Contact Type(s): Parent/Caretaker Interview, Sibling Interview/Observation	
Contact Sub Type:	

Children Concerning

Participant(s)

██████████

Narrative Details

Narrative Type: Original Entry Date/Time: 10/01/2013 10:34 AM Entered By: ██████████

9/26/13 6:25 p.m. HV ██████████
 CM met with ██████████ at this time. Mrs. ██████████ stated that ██████████ called her Saturday morning, but she did not get to talk to her. She stated that ██████████ violated her probation and that no one has paid her bond yet. She stated that she is not sure how long ██████████ will be in jail.
 Mrs. ██████████ stated that ██████████ has a doctor appointment on Monday to ensure that all of his shots are up to date. She stated that ██████████ will see Dr. ██████████ at ██████████ Medical Group. She stated that he starts day care soon. Mrs. ██████████ stated that ██████████ behaviors are improving. She stated that ██████████ had been visiting regularly and going to church with ██████████ but that ██████████ (a family friend) had been supervising her. She stated that ██████████ had told her ██████████ worker, ██████████ that she (Mrs. ██████████) was not being supportive of her.
 CM saw ██████████ at this time. He was playing and watching TV. ██████████ was very active and playful.



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: 09/20/2013

Contact Method: Phone Call

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/23/2013

Completed date: 09/23/2013

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: 09/23/2013 01:50 PM Entered By: [REDACTED]

9/20/13 11:46 a.m. TC to Child Find

CM was given the number for Child Find in [REDACTED] 984 1212. CM spoke to [REDACTED] about scheduling an intake for [REDACTED]. An intake was set for 10/4/13 at 8:00 a.m. Ms. [REDACTED] stated that the initial screening would consist of a vision, hearing, and speech screenings. She stated that once those results were received, they would do a developmental screening and they can make any necessary referrals based on those results. Ms. [REDACTED] stated that the family would come to [REDACTED].

9/20/13 11:56 a.m. TC to [REDACTED]

There was no answer. CM left a message for Mrs. [REDACTED]. Mrs. [REDACTED] returned the call at 3:30 p.m. She stated that [REDACTED] was doing well and that he would be starting day care in 2 weeks. She stated that he would be going to [REDACTED]. Mrs. [REDACTED] stated that [REDACTED] was supposed to graduate yesterday, but she was arrested for credit card and check theft. She stated that she admitted to the police that she had also been shooting up morphine again. Mrs. [REDACTED] stated that [REDACTED] told her she left her class yesterday because she was sick. Mrs. [REDACTED] stated that [REDACTED] stole the checks from the lady she was living with [REDACTED]. She stated that [REDACTED] and [REDACTED] used to work at a gas station together. Mrs. [REDACTED] stated that [REDACTED] had been visiting every Sunday and going to church with [REDACTED]. Mrs. [REDACTED] stated that she is afraid that [REDACTED] will not change. She stated that [REDACTED] has been in their family since she was 10 years old. She stated that [REDACTED] biological mother had hepatitis C and AIDS.

9/20/13 4:30 p.m. message from [REDACTED]

Ms. [REDACTED] stated that they discharged Ms. [REDACTED] today to [REDACTED] Jail because she was arrested. Ms. [REDACTED] left the contact number [REDACTED] j



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [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: 09/09/2013

Contact Method: Attempted Phone Call

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/23/2013

Completed date: 09/23/2013

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: 09/23/2013 12:06 PM Entered By: [REDACTED]

9/9/13 3:00 p.m. TC to [REDACTED]
 There was no answer. CM left a message with contact information.

9/11/13 11:41 a.m. message from [REDACTED]
 Ms. [REDACTED] left the contact number [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:	09/05/2013	Contact Method:	Attempted Phone Call
Contact Time:	04:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/18/2013
Completed date:	09/18/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/18/2013 05:10 PM Entered By: [REDACTED]

8/19/13 3:39 p.m. message from [REDACTED]
Ms. [REDACTED] left the contact number [REDACTED].

9/5/13 11:41 a.m. message from [REDACTED]
Ms. [REDACTED] left the contact number [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:	08/22/2013	Contact Method:	
Contact Time:	09:50 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/27/2013
Completed date:	08/27/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 08/27/2013 08:58 AM Entered By: [REDACTED]

Case came in for a p1 due to unresponsive child. During the investigation, sibling was placed with a maternal adoptive grandmother due to the substance abuse issues of the mother. Victim did pass away. Autopsy is pending. Request will be made for records. Records received from [REDACTED] DCS. Mother has court ordered plan to complete A&D and address MH issues. No medical issues reported for sibling. Mom started treatment at [REDACTED]

Action Steps:

CM to make Child Find referral-court requested
 Complete a face to face
 Obtain Autopsy report
 Present to CPIT
 Contact mom for updates

Narrative Type: Addendum 2 Entry Date/Time: 01/08/2014 10:01 AM Entered By: [REDACTED]

Autopsy received. Case planned to CPIT meeting, but due to weather, it was canceled. Present on 1/15/14.

Narrative Type: Addendum 1 Entry Date/Time: 09/18/2013 09:15 AM Entered By: [REDACTED]

Case staffed on 9/13/13. Number for Child Find provided to the CM from the website. Child is with Family who lives in [REDACTED] now and may not qualify for CHild Find. Mom has been left a voicemail message to contact CM. Contact with provider & child will be made. Prelim requested from DA office.



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:	08/12/2013	Contact Method:	Correspondence
Contact Time:	10:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/14/2013
Completed date:	08/14/2013	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: 08/14/2013 01:03 PM Entered By: [REDACTED]

8/5/13 11:02 a.m. message from [REDACTED]
 Ms. [REDACTED] left the contact number [REDACTED].

8/9/13 4:01 p.m. message from [REDACTED]
 Ms. [REDACTED] left the contact number [REDACTED].

8/12/13 2:45 p.m. TC to [REDACTED]
 There was no answer. CM left a message with contact information



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:	07/30/2013	Contact Method:	Face To Face
Contact Time:	10:30 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Court	Created Date:	08/14/2013
Completed date:	08/14/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Court Hearing		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/14/2013 01:03 PM Entered By: [REDACTED]

7/30/13 9:45 a.m. Ct. Hearing [REDACTED]

The following people were present:

[REDACTED] (GAL)
 [REDACTED] (mothers attorney)
 [REDACTED] (DCS legal)

Magistrate [REDACTED]

[REDACTED] reported that she was living with [REDACTED] at [REDACTED]. She stated that her phone number is [REDACTED]. Ms. [REDACTED] stated that [REDACTED] father is [REDACTED] (DOB [REDACTED]). She stated that Mr. [REDACTED] is currently in [REDACTED] jail for a methamphetamine charge. She stated that Mr. [REDACTED] turned himself in on 7/25/13. Ms. [REDACTED] stated that they have been to child support court regarding [REDACTED] but Mr. [REDACTED] went on the run 2 days afterward for violating his community corrections program. Ms. [REDACTED] stated that because of this, [REDACTED] last name was never changed. She stated that he does have visitation. Ms. [REDACTED] stated that she used to take [REDACTED] to Mr. [REDACTED] mothers home for Mr. [REDACTED] to visit. She stated that the child support court was through [REDACTED]. It was explained to Ms. [REDACTED] that for Mr. [REDACTED] to have visitation, he must come to [REDACTED] and ask for visitation.

Ms. [REDACTED] waived and reserved her right to a 3 day hearing at this time. It was ordered that [REDACTED] has custody of [REDACTED] and that [REDACTED] have supervised visits. These visits can be supervised by the grandparents or a 3rd party designee. It was also ordered that these visits not take place if [REDACTED] appears to be intoxicated. It was ordered that [REDACTED] finish her A&D treatment and submit to random drug screens. Ms. [REDACTED] was asked to complete parenting classes and obtain stable housing and employment. Ms. [REDACTED] stated that she is not on any current medications and that if she was drug screened today she would be negative for all substances. Ms. [REDACTED] stated that she will receive her Vivitrol shot today. She stated that she attends her program Monday through Friday and that it is a 4-6 week program. She stated that her insurance was extended.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CM was asked to make a referral to Child Find for [REDACTED]

[REDACTED] reported to the court that she was asked to do an A&D assessment when [REDACTED] DCS was involved. She stated that she did not complete the assessment because she passed a drug screen at the end of her case. She stated that she failed the drug screen at the beginning of her case. Ms. [REDACTED] stated that her DCS worker was aware that she was in jail in June and that her children were with her sister. Ms. [REDACTED] stated that she received her pre natal care at [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/29/2013

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/14/2013

Completed date: 08/14/2013

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: 08/14/2013 01:02 PM Entered By: [REDACTED]

7/24/13 11:53 a.m. message from [REDACTED] (Health Services)
 Ms. [REDACTED] left the contact number [REDACTED].

7/26/13 9:00 p.m. TC to [REDACTED]
 There was no answer. CM left a message. Ms. [REDACTED] returned CMs call at 11:46 a.m. on this date. Ms. [REDACTED] left a message for CM.

7/29/13 CM received a text from [REDACTED] asking if [REDACTED] needed to be at the court date tomorrow. According to Mrs. [REDACTED] her daughter told her that if she misses her treatment program, then she will violate her probation. CM advised Mrs. [REDACTED] that [REDACTED] needed to be at the court hearing because it involved her child and if she needed an note from court or the CM, documentation of the hearing could be provided to her.

7/29/13 4:23 p.m. TC to Ms. [REDACTED]
 Ms. [REDACTED] stated that Ms. [REDACTED] insurance is fine and that she will be able to stay in the program. Ms. [REDACTED] stated that Ms. [REDACTED] is in the program Monday through Friday from 9:30 a.m. to 3:30 p.m. She stated that Ms. [REDACTED] has not been drug screened at this time. Ms. [REDACTED] stated that she told Ms. [REDACTED] to come to the program after court tomorrow. She stated that Ms. [REDACTED] will receive the Vivitrol shot on Thursday. She stated that Ms. [REDACTED] has been approved for 12 days of the partial residential treatment but then she will stepped down to an IOP. Ms. [REDACTED] stated that she has not had any trouble with Ms. [REDACTED] and that she is pleased with her progress.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/22/2013

Contact Method: Correspondence

Contact Time: 11:10 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/14/2013

Completed date: 08/14/2013

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: 08/14/2013 01:01 PM Entered By: [REDACTED]

7/22/13 11:10 a.m. TC from Inv. [REDACTED]

Inv. [REDACTED] reported that the preliminary autopsy findings were as follows:

[REDACTED] had clear lungs, nothing of suspicious nature. Due to being on the ventilator, [REDACTED] brain was turned to mush. Most of his organs were going to be donated. At this point, it appears that this was an incident of unsafe sleep that ended in suffocation.

7/22/13 11:50 a.m. TC from [REDACTED]

Mrs. [REDACTED] stated that [REDACTED] is doing well. She stated that [REDACTED] text her and told her that she had passed two drug screens for probation. She stated that Ms. [REDACTED] told her that if she is not surrounded by drugs, then she will not use. Mrs. [REDACTED] stated that she advised her daughter that she needed to make her own decisions and not listen to peer influences. Mrs. [REDACTED] stated that Ms. [REDACTED] admitted to taking pills. She stated that Ms. [REDACTED] told her that they were not having a conversation about that and she left. She stated that when Ms. [REDACTED] delivered her baby, both were negative.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/19/2013

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/14/2013

Completed date: 08/14/2013

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: 08/14/2013 01:00 PM Entered By: [REDACTED]

7/19/13 9:20 a.m. TC from [REDACTED]

Mrs. [REDACTED] stated that she was brining the paper work to CM today. CM advised Mrs. [REDACTED] that she would be in meetings all day, but that she could leave the papers at the front desk for CM.

7/19/13 [REDACTED] brought the forms to the office for CM. CM was not available. Mrs. [REDACTED] left the forms for CM.



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: Phone Call
 Contact Time: 01:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 08/07/2013
 Completed date: 08/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2013 02:35 PM Entered By: [REDACTED]

7/18/13 CM contacted DCS legal [REDACTED] for an extension on the IPA in order to give the family time to make funeral arrangements and have the funeral/burial. Permission was granted.

7/18/13 8:51 a.m. message from Ms. [REDACTED]
 Mrs. [REDACTED] left the contact number [REDACTED]. CM returned the call at 9:15 a.m. There was no answer. CM left a message with contact information.]

7/19/13 9:20 a.m. TC from [REDACTED]
 Mrs. [REDACTED] stated that she was bringing the paper work to CM today. CM advised Mrs. [REDACTED] that she would be in meetings all day, but that she could leave the papers at the front desk for CM.

7/19/13 [REDACTED] brought the forms to the office for CM. CM was not available. Mrs. [REDACTED] left the forms for CM.



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: Phone Call
 Contact Time: 10:00 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 08/07/2013
 Completed date: 08/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Well Being
 Contact Type(s): Collateral Contact, Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2013 02:34 PM Entered By: [REDACTED]

7/16/13 CM was advised that [REDACTED] passed away on 7/15/13 at 7:00 p.m. at night.

7/16/13 2:36 p.m. message for [REDACTED] ([REDACTED])

Ms. [REDACTED] stated that she needed a phone number for [REDACTED] CM returned the call at 2:45 p.m. and provided Ms. [REDACTED] with the contact information.

7/17/13 CM received a message from [REDACTED] maternal great grandmother of [REDACTED] Ms. [REDACTED] reported that [REDACTED] funeral was tomorrow at 2:00 p.m. Ms. [REDACTED] stated that she would like to talk to CM about a few things and asked that CM contact her later in the day. Ms. [REDACTED] left the contact number [REDACTED] (home) and [REDACTED] cell).

7/17/13 11:38 a.m. message from [REDACTED]

Ms. [REDACTED] stated that she would like to speak to CM about rehab options.

CM returned the call at 7:43 p.m. There was no answer. CM left a message with contact information.

7/17/13 7:45 p.m. TC to Ms. [REDACTED]

Ms. [REDACTED] stated that she wanted to let CM know that while they were at the hospital, she overheard things from [REDACTED] and her husband that had her worried. She stated that Mrs. [REDACTED] and Ms. [REDACTED] were laughing because [REDACTED] had been cussing and had said that he was going to kill [REDACTED] Ms. [REDACTED] stated that they thought it was cute that [REDACTED] said this. She stated that Ms. [REDACTED] told her that she noticed a change in [REDACTED] behavior after he stayed with Mr. and Mrs. [REDACTED] while she was in jail. Ms. [REDACTED] stated that they also allow [REDACTED] to watch horror movies like Halloween. She stated that he went into the kitchen once and got a knife then came back into the living room and said 'Im going to kill you.'

Ms. [REDACTED] stated that Mr. [REDACTED] said that there was no way they could take [REDACTED] into their home. She stated that he also told Ms. [REDACTED] that he did not respect her and that she was a bad person. Ms. [REDACTED] stated that Ms. [REDACTED] friend, [REDACTED] told them that she was using drugs while she was pregnant. Ms. [REDACTED] stated that she and [REDACTED] tried to tell Ms. [REDACTED] that this was dangerous. Ms. [REDACTED] stated that Ms. [REDACTED] and Ms. [REDACTED] told them that it was not dangerous because they had researched it on the internet. Ms. [REDACTED] stated that [REDACTED] confronted Ms. [REDACTED] about this and she left the hospital and did not come back.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 08/14/2013 12:57 PM Entered By: [REDACTED]

7/16/13 1:10 p.m. TC from [REDACTED] ([REDACTED] Probation)
Ms. [REDACTED] stated that she has been working with Ms. [REDACTED] since May 13, 2013. She stated that Ms. [REDACTED] was arrested again on 6/17/13 for theft, which was her original charge. Ms. [REDACTED] stated that both charges were for under \$500. Ms. [REDACTED] stated that Ms. [REDACTED] was in jail for 3 weeks.



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: 07/15/2013 Contact Method: Face To Face
 Contact Time: 04:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 08/07/2013
 Completed date: 08/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/07/2013 02:33 PM Entered By: [REDACTED]
 7/15/13 1:00 p.m. CM completed the paper work with [REDACTED] for the Expedited Home Study. CM contacted DCS legal [REDACTED] to extend the IPA through Thursday 7/18/13 to allow CM time to get the expedited approved. Mrs. [REDACTED] took paperwork home with her for her and her husband to complete. Mrs. [REDACTED] stated that she would bring the paper work back to CM.

7/15/2013
 4:40pm
 Home Visit:

[REDACTED]
 [REDACTED]
 [REDACTED] ACV
 [REDACTED] Aunt

CONTENT:

This TL traveled to the home of Mr. and Mrs. [REDACTED] in [REDACTED]. I met with Mrs. [REDACTED] and her two children along with [REDACTED]. Mrs. [REDACTED] welcomed me into the home. The home is a two story home. I entered through a sliding glass door on the lower level of the home. It opens into the family area/den. This area has a sectional sofa, computer and television. Its a smaller room and Mrs. [REDACTED] was folding laundry on the sectional. Off this room is the masterbedroom. It appeared to be a normal bedroom. There are steps leading up to the upper part of the home. There is a handle and as we were walking up the stairs Mrs. [REDACTED] instructed [REDACTED] to hold on to the handle. Upstairs to the left is the kitchen and dining area. The kitchen did not have any safety hazards noted. The refrigerator had food as well as the pantry. To the right opens into the formal living room. The living room had workout equipment and lots of teeshirts and printing materials. Mrs. [REDACTED] explained that they run a tee shirt screening business out of the home. She stated that they are working on moving this stuff out of the home into a barn once it is finished. There is a closet located in this room with a latch. She opened the door and located inside is a gun safe that is locked. Mrs. [REDACTED] walked me down the hallway. The first room to the left is an open playroom filled with toys. Opposite that room is the bathroom. The bathroom was clean with running water. Straight down the hall opens into Mrs. [REDACTED] 10yo daughter's room. It was furnished in typical girl apparel. No safety concerns noted. TO the right of that room is



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Mrs. [REDACTED] 16yo son's room. Inside was typical boys stuff. Mrs. [REDACTED] explained that she and her mother are working on getting [REDACTED] toddler bed and informed me that it would go where the drumset is sitting currently. The drumset will then be moved into the living room. For this evening, Mrs. [REDACTED] has a pack-n-play that [REDACTED] will sleep in. In the hallway a smoke detector was located. I asked for them to press the button and it did not work. I informed Mrs. [REDACTED] she would need to replace the batteries or get a new one. She stated that she would do that. I walked back downstairs with the family. I spoke to [REDACTED] but he is limited verbally due to age and did appear to be shy. Mrs. [REDACTED] informed me that today is his birthday. I asked him how old he was and he said he was 10. [REDACTED] was clean and appropriately dressed. Mrs. [REDACTED] had questions about visitation with [REDACTED] I explained that without reviewing any court orders/safety plans I could address those but instructed her to call her case manager. I thanked her for her time and left the home.

OBSERVATION:

The home appears to be a well lived in home. While it had clutter, it was normal family clutter of toys and laundry. The family has two dogs inside who were well-behaved. The home did not have any foul animal odors either. The home appears to be a 4 bedroom dwelling with multiple bathrooms. It is two story. The yard is fenced in with a chainlink fence. There were no safety hazards noted in the home. The smoke detector needs new batteries or a replacement. I only noticed one smoke detector so the family may need to invest in another. The home has working utilities and electricity.

All three children were clean and appropriately dressed. They were cheerful and talkative. Mrs. [REDACTED] was polite and friendly.

PLAN:

This TL will send the case recording to appropriate case managers and team leaders for review.

Paperwork was not completed with Mrs. [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:	07/12/2013	Contact Method:	Phone Call
Contact Time:	09:00 AM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/07/2013
Completed date:	08/07/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Collateral Contact, Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 08/07/2013 02:32 PM Entered By: [REDACTED]

7/12/13 9:35 a.m. TC from [REDACTED] [REDACTED]
 Ms. [REDACTED] stated that they feel [REDACTED] condition is due to an unsafe sleep situation. Ms. [REDACTED] stated that [REDACTED] pupils are reactive, so it appears that he is not brain dead at this time; however, she stated that he is still on a ventilator. Ms. [REDACTED] stated that [REDACTED] also has a strange rash on his lower legs. She stated that he also has a moon shape cut on the back of his right calf. Ms. [REDACTED] stated that [REDACTED] does not have the rash on his genital area, buttock, or back of his head so they do not think it was diaper rash. She stated that it was more like a scratch instead of a cut. Ms. [REDACTED] stated that [REDACTED] does not have any bruising on his chest or sternum.

7/12/13 9:33 a.m. TC to [REDACTED] [REDACTED]
 There was no answer. CM left a message with contact information.

7/12/13 TC [REDACTED] contacted CM with information that the hospital wanted to restrict [REDACTED] contact with blood relatives only. TC advised CM that the hospital did not want [REDACTED] [REDACTED] at the hospital and wanted CM to do an IPA stating that Ms. [REDACTED] could not visit. CM was advised to contact DCS legal. CM contacted DCS legal [REDACTED] CM was advised that the hospital would have to follow their protocols for who could visit and who was appropriate to visit.



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: 08:00 AM

Contact Duration: Less than 04 Hour

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/07/2013

Completed date: 08/07/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact, Initial ACV Face To Face, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/07/2013 02:31 PM Entered By: [REDACTED]

7/11/13 8:00 a.m.

CM [REDACTED] spoke to Ms. [REDACTED] about another placement since Mrs. [REDACTED] home was not an option at this point. Ms. [REDACTED] stated that she did not have anyone else to help her. CM explained the assessment center option to Ms. [REDACTED]. Ms. [REDACTED] was in agreement with this.

CM observed [REDACTED] at this time. He was still on a ventilator and was unresponsive.

7/11/13 8:30 a.m.

CM [REDACTED] contacted DCS legal [REDACTED] about approval for the IPAs. CM was given approval to do an IPA for [REDACTED] to stay at the Assessment Center and for [REDACTED] to stay with the [REDACTED].

7/11/13 8:45 a.m.

CM spoke to Ms. [REDACTED] to let her know that the IPA was approved. Ms. [REDACTED] was on her way to [REDACTED] to get [REDACTED] at this time. CM observed [REDACTED] with Ms. [REDACTED]. [REDACTED] appeared to be well bonded with Ms. [REDACTED]. Ms. [REDACTED] was very attentive to [REDACTED].

7/11/13 9:00 a.m.

CM [REDACTED] went to Mrs. [REDACTED] home to transport [REDACTED] to the Assessment Center. [REDACTED] was seen at this time. He was observed to be dressed appropriately.

7/11/13 10:30 a.m. CM met with Mrs. [REDACTED] at [REDACTED]. CM made arrangements for CM [REDACTED] to see the [REDACTED] home in the afternoon after Mrs. [REDACTED] returned home. Mrs. [REDACTED] was taking Ms. [REDACTED] to her home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

7/11/13 12:00 p.m. CM [REDACTED] observed the [REDACTED] home. CM did not observe any hazards. [REDACTED] had a pack and play to sleep in. The home was neat and appropriate.

7/11/13 10:42 a.m. message from [REDACTED] ([REDACTED] social work)
Ms. [REDACTED] left the contact number [REDACTED].

7/11/13 11:37 a.m. message from Dr. [REDACTED] [REDACTED]
Dr. [REDACTED] left the contact number [REDACTED]. CM returned the phone call at 5:00 p.m. on this date. CM was advised that [REDACTED] UDS was negative for all substances.
CM spoke to Dr. [REDACTED] at 7:30 p.m. on this date. CM was advised that [REDACTED] condition was the same.



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: 07/11/2013 Contact Method: Face To Face
 Contact Time: 06:59 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 08/07/2013
 Completed date: 08/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2013 02:30 PM Entered By: [REDACTED]

7/11/13 6:59 a.m. [REDACTED]

Ms. [REDACTED] was interviewed in a conference room on the 5th floor of [REDACTED]. The following people were present:

PD Inv. [REDACTED]
 PD Inv. [REDACTED]
 CM [REDACTED]
 CM [REDACTED]

Ms. [REDACTED] provided the following information:

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 Born in [REDACTED]

Ms. [REDACTED] stated that she works at the Subway in [REDACTED]. She identified her parents, [REDACTED] ([REDACTED]) and [REDACTED] ([REDACTED]) as her emergency contacts. She stated that their address is on [REDACTED] in [REDACTED] TN but that she does not know the street address. Ms. [REDACTED] stated that she knew Ms. [REDACTED] in high school, but they have only been friends for a short while. Ms. [REDACTED] stated that she picked Ms. [REDACTED] up from Ms. [REDACTED] home on Tuesday and they went back to her home. She stated that they just hung out. Ms. [REDACTED] stated that Ms. [REDACTED] had both children with her at that time. Ms. [REDACTED] stated that she had to go to work at 5:00 p.m. that day, but only worked for 1.5 hours because it was a slow day. Ms. [REDACTED] stated that she had a doctors appointment on Tuesday at 9:15 a.m. and that she was out of her appointment by 10:30 a.m. She stated that when she got out of the appointment, she went to Ms. [REDACTED] uncles [REDACTED] home. She stated that they all call him [REDACTED]. Ms. [REDACTED] stated that she was in the living room at Mr. [REDACTED] home and that Ms. [REDACTED] was in the back bedroom. She stated that she is not aware if Ms. [REDACTED] did any drugs, but that she did not do any drugs. Ms. [REDACTED] originally stated that she was in the living room with [REDACTED] but then she stated that [REDACTED] was at Ms. [REDACTED] home and that he was not with them. She stated that [REDACTED] was with Ms. [REDACTED]. Ms. [REDACTED] stated that she stayed there for a few hours and that she hung out with [REDACTED] and [REDACTED] in the living room. She stated that they all know Ms. [REDACTED] somehow. Ms. [REDACTED] then stated that they were at the home for almost 12 hours. She stated that



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

during that time, Ms. [REDACTED] would leave and come back into the living room for short periods of time. She stated that when Ms. [REDACTED] came out of the back bedroom, she was messed up and was a different person. She stated that Ms. [REDACTED] was in the back bedroom with Mr. [REDACTED] and his girlfriend, [REDACTED]. She stated that they left the home around 8:00 p.m. and went to Sonic. Ms. [REDACTED] stated that they went back to Mr. [REDACTED] home and finally left there around 9:00 p.m. She stated that they went to pick up from Ms. [REDACTED] home. She stated that they went to Ms. [REDACTED] home after that to pack some of her belongings. She stated that during that time, [REDACTED] was playing with some of his toys.

Ms. [REDACTED] stated that on Wednesday (7/10/13), Ms. [REDACTED] brought [REDACTED] to her home around 9:00 a.m. because she had a doctors appointment. She stated that she, Ms. [REDACTED] and [REDACTED] left her home around 9:45 a.m. to go to Ms. [REDACTED] old home to pack some things up. Ms. [REDACTED] stated that Ms. [REDACTED] showed up around 11:30 a.m. and brought them trash bags. She stated that Ms. [REDACTED] was supposed to help them load some of Ms. [REDACTED] things, but Ms. [REDACTED] had a load of furniture she was taking to the dump. She stated that they loaded all the clothes and toys at that time. Ms. [REDACTED] stated that Ms. [REDACTED] left the home for a while with [REDACTED]. She stated that was around 12:30 p.m. She stated that she and Ms. [REDACTED] wanted to go swimming later that day, so Ms. [REDACTED] brought [REDACTED] back and took [REDACTED] home. She stated that was between 2:30 p.m. and 3:00 p.m. Ms. [REDACTED] stated that they went to [REDACTED] BP to get ice cream and while they were there, it started raining. She stated that they did not swim because of the rain, but instead they went back to her home. She stated that was around 3:15 p.m.

Ms. [REDACTED] stated that she left her home around 4:45 p.m. to go to work. She stated that she had to be at work by 5:00 p.m. Ms. [REDACTED] stated that Ms. [REDACTED] text her around 7:20 p.m. while she was at work and said to meet her at her home when she got off work. Ms. [REDACTED] stated that she got off work around 8:00 p.m. She stated that when she got to Ms. [REDACTED] home, [REDACTED] (last name unknown) green Honda Civic was there. Ms. [REDACTED] stated that [REDACTED] is Mr. [REDACTED] girlfriend. Ms. [REDACTED] stated that Ms. [REDACTED] had [REDACTED] at this time. Ms. [REDACTED] stated that when she went into the home, Ms. [REDACTED] was in the kitchen. She stated that she heard [REDACTED] talking to a male, but she does not know who the male was. She stated that she heard his voice, but she never saw him. She stated that this was around 8:15 p.m. She stated that [REDACTED] was with Ms. [REDACTED] at this time. Ms. [REDACTED] stated that she and Ms. [REDACTED] sat at the home and talked for a few minutes. She stated that Ms. [REDACTED] was aggravated because [REDACTED] was acting up and throwing a fit. She stated that Ms. [REDACTED] called Ms. [REDACTED] at that time and told Ms. [REDACTED] that she could not handle [REDACTED] so she was brining him to Ms. [REDACTED] home. Ms. [REDACTED] stated that [REDACTED] has ADHD and is not medicated.

Ms. [REDACTED] stated that they left [REDACTED] around 8:30 p.m. Ms. [REDACTED] stated that both Ms. [REDACTED] and Ms. [REDACTED] tried to call Ms. [REDACTED] on the drive home, but she did not answer the phone because they were listening to music. She stated that when they pulled into the driveway, Ms. [REDACTED] was outside crying and she told Ms. [REDACTED] what had happened. Ms. [REDACTED] stated that she went into the bedroom with Ms. [REDACTED]. She stated that she just saw [REDACTED] laying on the bed lifeless and Ms. [REDACTED] doing CPR. Ms. [REDACTED] stated that she is getting induced on 7/18/13. She stated that she has been sober for almost a year. Ms. [REDACTED] stated that she used to snort Roxicodone with Ms. [REDACTED] but she quit doing it one month before she got pregnant. Ms. [REDACTED] stated that she knows that Ms. [REDACTED] took Morphine while they were at Mr. [REDACTED] home. Ms. [REDACTED] stated that she has seen track marks on Ms. [REDACTED] arms and that she has tried to talk to Ms. [REDACTED] about this.

Ms. [REDACTED] stated that she thinks that Mr. [REDACTED] was the one in the backroom whos voice she heard. She stated that the same man that was at Ms. [REDACTED] was the one that was at Mr. [REDACTED] home. She stated that he was not there when they were packing. Ms. [REDACTED] stated that Ms. [REDACTED] did morphine at Mr. [REDACTED] home, but not at the trailer. She stated that Ms. [REDACTED] came out of the back of Mr. [REDACTED] home and was messed up Ms. [REDACTED] stated that she could see it in Ms. [REDACTED] eyes and she acts like she doesnt care. Ms. [REDACTED] stated that she used to steal with Ms. [REDACTED] and she got in trouble for it. Ms. [REDACTED] reported that she would be negative if she was drug screened today. Ms. [REDACTED] stated that she was willing to take a drug screen, but she could not use the bathroom at this point.

Ms. [REDACTED] stated that the last time she took a Roxicodone was a month before she was pregnant. She stated that she would do a half a week with Ms. [REDACTED]. She stated that she is on pre natal vitamins, but no other prescriptions. Ms. [REDACTED] stated that Ms. [REDACTED] used to snort Roxicodone, but she does not know if Ms. [REDACTED] has shot up or not. Ms. [REDACTED] stated that she has seen track marks on Ms. [REDACTED] before she was in jail. She stated that she saw the marks on Ms. [REDACTED] arm and hand.

Ms. [REDACTED] was asked about selling her PSP for money. Ms. [REDACTED] stated that she went to [REDACTED] Mall to sell the PSP for extra money, not for money for a pill. She stated that they went to [REDACTED] to the McDonalds next, but that they did not buy a pill from anyone.

Ms. [REDACTED] stated that she is being induced on 7/18/13. She stated that she goes to the Womans Care Group in [REDACTED]. She stated that she goes once a week and that she is not high risk.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CM [REDACTED] drug screened Ms. [REDACTED] at this time. Ms. [REDACTED] was positive for Oxycodone. Ms. [REDACTED] denied taking an Oxycodone; however, she stated that she took half a pill from Ms. [REDACTED]. She stated that Ms. [REDACTED] told her that it was a Tylenol. Ms. [REDACTED] was asked why Ms. [REDACTED] would say that she took the other half of the Roxicodone. Ms. [REDACTED] stated that Ms. [REDACTED] was lying and that the pill Ms. [REDACTED] gave her must not have been Tylenol. CMs spoke to Ms. [REDACTED] about the dangers of using drugs while she was pregnant.



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: 05:53 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/07/2013

Completed date: 08/07/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2013 02:28 PM Entered By: [REDACTED]

7/11/13 5:53 a.m. Dr. [REDACTED] reported that [REDACTED] was having seizures and was taking seizure medications as needed. He stated that in addition, [REDACTED] is taking 2 other preventative medications. He reported that initially, [REDACTED] was breathing more on his own, but that his breathing has become very shallow. He stated that at this point, nothing was glaringly obvious. He stated that [REDACTED] was having an inconsistent response to pain, but that his pupils are reactive. He stated that [REDACTED] is at risk for a significant brain injury. He stated that [REDACTED] chest X rays have been done and that his lungs look great. He stated that [REDACTED] does not have a large amount of blood on his brain. Dr. [REDACTED] reported that [REDACTED] brain injury is from a lack of oxygen.



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: 04:25 AM Contact Duration: Less than 02 Hour
Entered By: [REDACTED] Recorded For:
Location: Hospital Created Date: 08/07/2013
Completed date: 08/07/2013 Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Collateral Contact
Contact Sub Type:

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/07/2013 02:27 PM Entered By: [REDACTED]

7/11/13 4:25 a.m. [REDACTED]

Ms. [REDACTED] was interviewed in a conference room on the 5th floor of [REDACTED]. The following people were present:

- PD Inv. [REDACTED]
- PD Inv. [REDACTED]
- CM [REDACTED]
- CM [REDACTED]

Ms. [REDACTED] was advised of her rights.
Ms. [REDACTED] provided CM with the following information:

[REDACTED]
Born in [REDACTED]

[REDACTED]

[REDACTED] identified her cousin, [REDACTED] (DOB [REDACTED]) and her grandmother, [REDACTED] as her emergency contacts.

Ms. [REDACTED] stated that she is not currently working because [REDACTED] has a medium to large hole in her heart and she has to take a lot of time off work for doctors appointments. She stated that [REDACTED] is having open heart surgery this fall. She stated that she did work at [REDACTED] Child Development Center as a teacher. She stated that [REDACTED] was in the hospital a lot when she was first born. She stated that [REDACTED] had an NJ tube because she was allergic to dairy. She stated that [REDACTED] GI doctor is Dr. [REDACTED] at [REDACTED]. She stated that [REDACTED] is allergic to soy and coconut.

Ms. [REDACTED] stated that she moved in with her mother, [REDACTED] about 3 weeks ago. She stated that she never



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

had a close relationship to Ms. [REDACTED] because Ms. [REDACTED] always picked boyfriends over her. She stated that Ms. [REDACTED] and her children were already residing in the home. Ms. [REDACTED] stated that she and [REDACTED] sleep in the living room, but they actually have a bedroom in the office. She stated that there is more room in the living room. Ms. [REDACTED] stated that [REDACTED] has a pack and play she sleeps in. She stated that Ms. [REDACTED] and the children have their own bedroom and that [REDACTED] uses [REDACTED] crib since she is sleeping in the pack and play. Ms. [REDACTED] stated that she has known Ms. [REDACTED] since they were in the 11th grade. She stated that she lived with Ms. [REDACTED] some while she (Ms. [REDACTED]) was pregnant, but that she also stayed with her mother some because it was closer to the hospital.

Ms. [REDACTED] stated that Ms. [REDACTED] left [REDACTED] with Ms. [REDACTED] on Tuesday 7/9/13. She stated that Wednesday morning, Ms. [REDACTED] had a doctors appointment at 9:00 a.m. at [REDACTED] Outpatient, so she took [REDACTED] back to Ms. [REDACTED] in [REDACTED]. She stated that while Ms. [REDACTED] was gone, [REDACTED] called her and said that he wanted to go with her, so she went back and got [REDACTED]. Ms. [REDACTED] stated that Ms. [REDACTED] went back to the home later on to get [REDACTED] and to drop [REDACTED] back off. She stated that Ms. [REDACTED] and [REDACTED] arrived back at their home between 3:30 p.m. and 4:00 p.m. Ms. [REDACTED] stated that Ms. [REDACTED] changed [REDACTED] diaper and fed him. She stated that [REDACTED] was in her crib at this time. Ms. [REDACTED] stated that she went outside to smoke. She stated that [REDACTED] played outside while she smoked and that [REDACTED] played in a swing. Ms. [REDACTED] stated that Mr. [REDACTED] arrived at the home around 5:30 p.m. and they ate dinner. She stated that they ate fried chicken, potato salad, green beans, and mashed potatoes. Ms. [REDACTED] stated that at that time, [REDACTED] was his normal, happy self. Ms. [REDACTED] stated that Ms. [REDACTED] fed [REDACTED] while they were eating, but she does not know how much he ate. She stated that Ms. [REDACTED] burped [REDACTED] after he ate. Ms. [REDACTED] stated that they went back outside with the children after dinner. She stated that she put [REDACTED] to bed around 8:00 p.m. She stated that she took a bath at that time and that [REDACTED] was outside with Ms. [REDACTED]. She stated that Mr. [REDACTED] was inside on the computer at this time. Ms. [REDACTED] stated that she came back outside to smoke after her bath. She stated that [REDACTED] was in bed at this time. She stated that she was outside with Ms. [REDACTED] and Mr. [REDACTED]. Ms. [REDACTED] stated that Ms. [REDACTED] went inside to check on [REDACTED] and that Mr. [REDACTED] went inside to take a shower. She stated that Mr. [REDACTED] came back outside shortly after that and reported that [REDACTED] was not breathing. Ms. [REDACTED] stated that she ran inside and that Ms. [REDACTED] was freaking out. She stated that she knocked Ms. [REDACTED] out of the way and started CPR on [REDACTED]. Ms. [REDACTED] stated that Mr. [REDACTED] was on the phone with 911, who was giving him instructions on how to perform CPR. She stated that Mr. [REDACTED] was telling her what to do.

Ms. [REDACTED] stated that Ms. [REDACTED] and Ms. [REDACTED] showed up at the home after that. She stated that they came into the room and Ms. [REDACTED] freaked out. She stated that she told Ms. [REDACTED] to take Ms. [REDACTED] outside. Ms. [REDACTED] stated that [REDACTED] was belly up with she first saw him because her mother had tried to start CPR on him. Ms. [REDACTED] stated that she turned [REDACTED] around so his feet were pointed at the head board so she could reach him better. Ms. [REDACTED] stated that the 911 operator told Mr. [REDACTED] to turn [REDACTED] over and pat him on the back incase he was choking then to turn him back over. Ms. [REDACTED] stated that [REDACTED] made gurgling noises when this happened. Ms. [REDACTED] stated that there were no blankets or pills near [REDACTED] when she saw him. She stated that they were on the other side of the bed. Ms. [REDACTED] stated that [REDACTED] normally cries a lot during the day, but he did not cry a lot while she was around him that day.

Ms. [REDACTED] was asked to do a timeline of the days events to the best of her knowledge:

7/10/13:

11:00 a.m. Ms. [REDACTED] and [REDACTED] get out of bed.

3:30 p.m. 4:30 p.m. Ms. [REDACTED] and [REDACTED] arrived home. Ms. [REDACTED] was in the living room going through clothes. Ms. [REDACTED] fed and changed [REDACTED] played in the floor. Ms. [REDACTED] went outside to smoke. [REDACTED] went outside and was in his swing. They were outside 10-15 minutes. Ms. [REDACTED] began cooking dinner Ms. [REDACTED] watched [REDACTED] as he played in the floor. He was on his back. [REDACTED] took a short nap.

5:30 p.m. Mr. [REDACTED] arrived home. He got a diet coke and sat in the recliner. He went outside to smoke while Ms. [REDACTED] finished dinner. [REDACTED] was outside in his swing and [REDACTED] was playing on the porch. Ms. [REDACTED] took the children back inside the home and [REDACTED] was playing in the floor. [REDACTED] ate mashed potatoes in her highchair while the adults ate. They went back outside to smoke afterwards.

8:00 p.m. Ms. [REDACTED] put [REDACTED]

8:30 p.m. Ms. [REDACTED] took a shower.

8:35 a.m. Ms. [REDACTED] was out of the shower and went outside to smoke. Ms. [REDACTED] was outside with Ms. [REDACTED] and Mr. [REDACTED] [REDACTED] was in bed. Ms. [REDACTED] was waiting on a phone call. Mr. [REDACTED] went inside to take a shower. Ms. [REDACTED] checked on

Ms. [REDACTED] stated that she does not remember the time that she went into the bedroom. She stated that Ms. [REDACTED] screamed for Mr. [REDACTED] to come in there. Ms. [REDACTED] stated that Mr. [REDACTED] called 911 and while he was on the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

phone with the 911 operator, Ms. ██████ arrived at the home. She stated that Ms. ██████ ran into the bedroom crying because Ms. ██████ had told her what happened. Ms. ██████ stated that she was doing CPR at this time. Ms. ██████ stated that the EMTs arrived while she was doing CPR and they took over. She stated that the EMTs took ██████ to the ambulance and transported him to ██████ She stated that Ms. ██████ rode in the ambulance and that she, Ms. ██████ and Ms. ██████ rode together.

Ms. ██████ stated that she has a history of drug use. She stated that she used to snort Morphine and Roxicodone, but that she stopped when she found out she was pregnant. She stated that she did not want a drug addicted baby. Ms. ██████ stated that she was stealing stuff and selling it for pills. Ms. ██████ stated that she did not stay with Ms. ██████ much while she was pregnant because she did not want to relapse. She stated that she knew Ms. ██████ was still using drugs. Ms. ██████ stated that she moved in with her mother in November 2012 and they did not get a long, so she moved back in with Ms. ██████ in January 2013. Ms. ██████ stated that she got into public housing after that, but she was kicked out of public housing because her boyfriend, ██████ spent the night. She stated that while Mr. ██████ was at her home, his family called the police and told them where he was. She stated that he had a warrant for his arrest. Ms. ██████ stated that Mr. ██████ was arrested at her home. Ms. ██████ stated that she moved in with a friend in May and stayed there until she moved in with her mother. Ms. ██████ stated that Ms. ██████ does more things for Ms. ██████ than for her.

Ms. ██████ stated that if she was drug screened today she would be clean; however, she last used Morphine/Opana 1-2 weeks ago because Ms. ██████ talked her into it. Ms. ██████ stated that Ms. ██████ has anger issues and she does not like saying no to her. She stated that Ms. ██████ was calling her names and telling her to use the drug. Ms. ██████ stated that Ms. ██████ injected the drug into her arm. She stated that they shared a needle. Ms. ██████ stated that Ms. ██████ already had the drug with her when she arrived at the home. She stated that it was just her and Ms. ██████ at Ms. ██████ old home. Ms. ██████ stated that she does not like hanging out with Ms. ██████ because of the drug use. Ms. ██████ stated that she is not sure who Ms. ██████ gets the drug from. Ms. ██████ stated that she last used drugs in March 2012 before she found out she was pregnant.

Ms. ██████ stated that she is not sure if Ms. ██████ uses any drugs. She stated that she is not sure what all Ms. ██████ uses. Ms. ██████ stated that ██████ father, ██████ has a methamphetamine charge. She stated that he will call sometimes to see ██████ Ms. ██████ stated that Ms. ██████ does not know about the drug use. She stated that Ms. ██████ told Ms. ██████ that if she was doing drugs, she would have to leave the home. Ms. ██████ stated that Ms. ██████ would do random drug screens on them. Ms. ██████ stated that ██████ father is ██████ She stated that he does landscaping. She stated that he lives with different friends. She stated that he is not on the birth certificate, but that he has done paternity testing. She stated that they are waiting on a court date for child support court.

Ms. ██████ stated that ██████ has a prescription for liquid medication, but that she is not sure what it is for. She stated that ██████ has been congested for the last few days. She stated that you could hear it in his throat. She stated that she has not noticed him having a runny nose. Ms. ██████ stated that she has never seen anyone give ██████ his medications, so she is not sure who gives the medications. She stated that she does not know if he took any medication last week. She stated that when he spits up, it is chunky and white. She stated that she saw that last week. Ms. ██████ stated that she has seen ██████ with a diaper rash. She stated that it was just red on his testicles. Ms. ██████ stated that Ms. ██████ started her pre natal treatment at ██████ Hospital, but she did not like it there so she switched to ██████ Ms. ██████ stated that Ms. ██████ went to 2-3 different doctors. Ms. ██████ stated that ██████ was currently with her paternal grandmother, ██████ Ms. ██████ stated that ██████ is her ex boyfriend, and that he was in ██████ life when she was first born. She stated that Mr. ██████ was on drugs, but that he never gave them to her because he did not want her to lose ██████ Ms. ██████ stated that DCS was called to her home in ██████ because Mr. ██████ gave ██████ Muralax and his aunt reported that he was giving ██████ Tylenol to sleep. Ms. ██████ stated that the case manager in ██████ told her that it was best for her not to be around Mr. ██████ but that it is not in any court order. Ms. ██████ stated that Mr. ██████ has two other children, ██████ and ██████ (last name unknown). She stated that the father, ██████ (DOB ██████) has a baby boy on the way with a girl named ██████ (last name unknown).

Ms. ██████ stated that her mother has Bi Polar Disorder and Suicidal Depression. She stated that Ms. ██████ is also possibly schizophrenic. Ms. ██████ stated that Ms. ██████ keeps her daily medications in a pill box that she keeps on her dresser. She stated that she is not sure where the bottles for the medications are. She stated that Ms. ██████ leaves the door to her room locked and she keeps the key with her.

Ms. ██████ stated that ██████ has a severe ear infection right now. She stated that TEIS has been to her home for an assessment and that they are supposed to start physical therapy for ██████



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Ms. [REDACTED] submitted to a drug screen at this time. She was negative for all drugs. CM contacted TL [REDACTED] and TC [REDACTED] with this information. CM was advised to speak to Ms. [REDACTED] about family members for an IPA. Ms. [REDACTED] initially identified Ms. [REDACTED] however, Ms. [REDACTED] could not keep [REDACTED]. Ms. [REDACTED] then identified her aunt and uncle, [REDACTED] and [REDACTED]. CM contacted Mrs. [REDACTED] who agreed to get [REDACTED]. Mrs. [REDACTED] provided CM with the following information:

[REDACTED]

[REDACTED]

[REDACTED]

Ms. [REDACTED] stated that she has a simple assault charge from the 1990s which was dismissed. She stated that it has not been expunged yet because her ex husband has not paid the fine. She stated that he reported that she assaulted him; however, she was at work at the time he was alleging.

Ms. [REDACTED] contacted Ms. [REDACTED] and asked that she bring [REDACTED] to [REDACTED]. Ms. [REDACTED] agreed to meet Ms. [REDACTED] at the hospital to get [REDACTED].

CM contacted TL for a Code X check.



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 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 08/07/2013
 Completed date: 08/07/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/07/2013 02:26 PM Entered By: [REDACTED]

7/11/13 2:20 a.m. [REDACTED]

Ms. [REDACTED] was interviewed in a conference room on the 5th floor of [REDACTED]. The following people were present:

PD Inv. [REDACTED]

PD Inv. [REDACTED]

CM [REDACTED]

CM [REDACTED]

Ms. [REDACTED] was advised of her rights.

Ms. [REDACTED] provided the following information:
 [REDACTED]

Ms. [REDACTED] stated that she was not currently working and that she receives disability. She stated that she has lived in her home for 3 years. Ms. [REDACTED] reported that she had taken her medication before [REDACTED] was found. Ms. [REDACTED] appeared to be drowsy at this time.

Dr. [REDACTED] was in the room at the beginning of the interview. Ms. [REDACTED] spoke to him and provided him with the following information:

Ms. [REDACTED] reported that when she picked [REDACTED] up from Ms. [REDACTED] in [REDACTED] he was asleep. She reported that when they got home, he was happy and laughing. She stated that he played with her granddaughter, [REDACTED] (8 months old) and then became fussy. Ms. [REDACTED] reported that she fed [REDACTED] at that time. She stated that later that night, she put [REDACTED] to bed and went outside to smoke. She stated that she came back in and brushed her teeth and took her medication. Ms. [REDACTED] stated that she got in bed and noticed that [REDACTED] lips were blue and that he was very pale. She stated that he was on his stomach at this time. Ms. [REDACTED] stated that she screamed and [REDACTED] did not respond. Ms. [REDACTED] stated that she thought it was about 15 minutes from when she put [REDACTED] to bed and came back in to the room. Ms. [REDACTED] stated that she tried to do CPR, but she freaked out. She stated that her daughter, [REDACTED] took over CPR. She stated that once EMTs arrived, they took over CPR then took [REDACTED] to the ambulance and



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

transported him to [REDACTED]

Ms. [REDACTED] stated that when she fed [REDACTED] before bed, he did not eat his whole bottle. She stated that was not normal for him. Ms. [REDACTED] stated that [REDACTED] had runny bowel movements that day, but that she thought it was from where he ate the wrong formula.

Ms. [REDACTED] reported that [REDACTED] did not suffer any trauma while he was with her. She stated that she does not think he suffered any trauma when he was with Ms. [REDACTED] either. Ms. [REDACTED] reported that she went to Ms. [REDACTED] between noon and 12:30 p.m. on 7/10/13. She stated that he was in his bouncy seat when she got there. She stated that he was fussy, so she picked him up and he was fine.

Dr. [REDACTED] left the room at this time.

Ms. [REDACTED] stated that she lives with her boyfriend, [REDACTED] and her daughter, [REDACTED] (DOB [REDACTED]). She stated that she has two other adult children, [REDACTED] (DOB [REDACTED]) and [REDACTED] (DOB [REDACTED]). She stated that they both live in [REDACTED]. She stated that her mother is [REDACTED]. She stated that her mother lives at [REDACTED] and that her phone number is [REDACTED].

Ms. [REDACTED] stated that Ms. [REDACTED] and her children have lived at her home for about a month and a half. She stated that she had [REDACTED] all night Tuesday night. She stated that she dropped [REDACTED] off with Ms. [REDACTED] around 11:00 a.m. on Wednesday morning (7/10/13). She stated that [REDACTED] was with Ms. [REDACTED] at this time. She stated that she met Ms. [REDACTED] at her old home in [REDACTED].

Ms. [REDACTED] stated that she picked [REDACTED] back up around 2:30 p.m. and they were back at her home by 3:00 p.m. She stated that Ms. [REDACTED] had [REDACTED] then.

Ms. [REDACTED] stated that she fed [REDACTED] before dropping him off. She stated that he ate the correct formula then, but she put the wrong can of formula in the diaper bag. She stated that she fed [REDACTED] while they were in the truck on their way to [REDACTED]. She stated that he was in the seat next to her, so she fed him while she was driving.

Ms. [REDACTED] stated that she took her son money and went to the dump with furniture that day. She stated that she had a doctors appointment at 1:00 p.m. She stated that it was group therapy for her Bi Polar Disorder. Ms. [REDACTED] stated that she sees [REDACTED]. She stated that she is prescribed Paxil, Lamictal, Gabapentin, and Lithium. She stated that Dr. [REDACTED] is her prescribing doctor. She stated that she sees him every 3 months at [REDACTED]. Ms. [REDACTED] stated that she has nerve problems and has been on medication for 10 years. She stated that she has been hospitalized for 3 days before.

Ms. [REDACTED] stated that she took [REDACTED] with her when after she dropped [REDACTED] off. She stated that he threw a fit to go with her, so she took him. Ms. [REDACTED] stated that the furniture was from rental properties that Mr. [REDACTED] and [REDACTED] rent out.

Ms. [REDACTED] stated that Ms. [REDACTED] only had [REDACTED] during the time that she (Ms. [REDACTED]) was gone. Ms. [REDACTED] stated that she is not sure what Ms. [REDACTED] did or if she fed [REDACTED] while he was at her home. She stated that she took the diaper bag to Ms. [REDACTED] with clothes, formula, and diapers in it.

Ms. [REDACTED] stated that she took [REDACTED] to Ms. [REDACTED] earlier in the day, instead of around noon. She stated that she had her doctors appointment at 10:00 a.m., not 1:00 p.m. She stated that she left her home around 8:30 a.m. and went to her doctors appointment. She stated that is when she saw [REDACTED]. She stated that she dropped [REDACTED] off after meeting with Ms. [REDACTED]. She stated that after meeting with Ms. [REDACTED] she went back to Ms. [REDACTED]. She stated that at that time, Ms. [REDACTED] had both children with her. She stated that once she got back to Ms. [REDACTED] home, she got [REDACTED] and left [REDACTED] with Ms. [REDACTED]. She stated that she came back to Ms. [REDACTED] home around 2:30 p.m. and they switched the children.

Ms. [REDACTED] stated that she put [REDACTED] in bed and she put a pillow down so he would not roll off the bed. She stated that he scoots while he is in bed instead of rolling. She stated that when she got in bed with him, he was blue.

Ms. [REDACTED] was asked to go back and think about the days events in terms of time. She stated that her and [REDACTED] arrived home around 3:00 p.m. She stated that she took him in the home and he laid in the floor on a comforter. She stated that he watched TV and was laughing. Ms. [REDACTED] stated that [REDACTED] did not nap once they got home. She stated that he did not spit up yesterday. Ms. [REDACTED] stated that she started cooking dinner between 3:30 p.m. and 4:00 p.m. She stated that around 8:00 a.m., she fed [REDACTED] his correct formula, but he only drank about ½ the bottle.

Ms. [REDACTED] stated that during the hours of 3:00 p.m. and 8:00 p.m., [REDACTED] was outside playing on his swing. She stated that [REDACTED] was also outside. Ms. [REDACTED] stated that she was outside for part of the time and that Ms. [REDACTED] was outside. Ms. [REDACTED] stated that Mr. [REDACTED] arrived home around 5:00 p.m. Ms. [REDACTED] stated that they all at dinner and went back outside around 5:15 p.m. Ms. [REDACTED] stated that Ms. [REDACTED] gave [REDACTED] a bottle while she was cooking. She then stated that she propped the bottle into [REDACTED] mouth while she was cooking. She stated that he did not drink all of the bottle.

Ms. [REDACTED] stated that she laid [REDACTED] down in her bed around 8:30 p.m. She stated that she laid him down in the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

center of the bed at the top of the bed. She stated that he was about 6 inches from the headboard. Ms. ██████ stated that she laid ██████ down on his stomach because that is what Ms. ██████ likes. She stated that she made a half circle with the comforter and she put pillows along the outside of the comforter. Ms. ██████ stated that ██████ can roll from his stomach to his back, but not from his back to his stomach. She stated that he only had his diaper on. Ms. ██████ stated that she loved on ██████ and rocked him for a few minutes. She stated that she went outside to smoke one cigarette and then came back into the home. She stated that she does not know how long she was outside. She stated that she went to the bathroom in the hall and brushed her teeth. She stated that she went back into the bedroom to get her medication. She stated that she had her Mountain Dew with her, so she took the medication when she was in her room. She stated that she had the same drink that she started drinking at 3:30 p.m. Ms. ██████ stated that she crawled in bed with ██████ and she went to move him because his head had moved slightly. She stated that when she touched him, he was limp, white as a ghost, and his lips were blue. Ms. ██████ stated ██████ was still on his stomach and that he did not have any vomit or slobber around him. She stated that the blankets and pillows were still in the same place. She stated that they were not near his face.

Ms. ██████ stated that she started screaming that ██████ was not breathing. Ms. ██████ stated that she tried to do CPR, but could not so Ms. ██████ came into the room and began CPR. Ms. ██████ stated that Mr. ██████ called 911 from his phone. She stated that the dispatcher was telling Mr. ██████ what to do and he was relaying the information to Ms. ██████. She stated that Mr. ██████ kicked her out of the room at that time, so she went to the porch and started crying. She stated that during this time, she attempted to contact Ms. ██████ but she did not answer the phone. Ms. ██████ stated that she was only outside smoking for about 15 minutes.

Ms. ██████ stated that she called Ms. ██████ at 9:14 p.m. and she did not answer. She stated that soon after that, Ms. ██████ and Ms. ██████ pulled into the driveway. She stated that the ambulance pulled into the driveway at the same time as Ms. ██████. Ms. ██████ stated that as soon as Ms. ██████ got out of the car, she (Ms. ██████) fell to her knees and said that ██████ was not breathing. She stated that Ms. ██████ ran into the home. Ms. ██████ stated that she followed the EMTs into the home.

Ms. ██████ stated that she called Ms. ██████ after that.

Ms. ██████ stated that earlier that day, ██████ and ██████ were playing in the floor and she was crawling on him. She stated that she did not think that ██████ hurt him because she only weighs 15 pounds. She stated that ██████ acted fine after that. Ms. ██████ stated that Ms. ██████ was on drugs when ██████ was born. She stated that she was not aware that Ms. ██████ was using any illegal substances. Ms. ██████ stated that she has known Ms. ██████ for 4-5 years. She stated that Ms. ██████ did not use drugs until she became friends with 2 different people. Ms. ██████ stated that she does not know those peoples names. Ms. ██████ stated that she told Ms. ██████ that if she used any drugs, then she could not live at her home. She stated that she told her daughter, ██████ the same thing. Ms. ██████ stated that she treats Ms. ██████ like a daughter. Ms. ██████ stated that she does not have any concerns about Ms. ██████ using drugs. Ms. ██████ stated that Ms. ██████ does not work. She stated that Ms. ██████ used to shoplift, but that she does not do that anymore. She stated that she is not sure where Ms. ██████ gets her income from. She stated that Ms. ██████ is on WIC and that she will give Ms. ██████ \$5 - \$10 sometimes. Ms. ██████ stated that she does not believe that anything happened to ██████ while he was with Ms. ██████ and Ms. ██████.

Ms. ██████ stated that she figured out that Ms. ██████ was shooting up when she moved into the home because she saw Ms. ██████ arms. She stated that Ms. ██████ probably used with Ms. ██████. Ms. ██████ stated that Ms. ██████ has crushed and snorted morphine in the past before ██████ was born and before she was pregnant. Ms. ██████ stated that Ms. ██████ may abuse Adderall because she had a prescription in the past. Ms. ██████ stated that she has heard that Ms. ██████ is also on drugs. Ms. ██████ stated that Ms. ██████ was recently in jail in ██████. She stated that while she was in jail, Ms. ██████ sister, ██████ had the children. Ms. ██████ stated that Ms. ██████ took the children to the doctor 2-3 days after Ms. ██████ was out of jail. She stated that the children had allergies. Ms. ██████ stated that both children were on medication. She stated that ██████ was supposed to take his medication twice a day and ██████ once a day. Ms. ██████ stated that the children did not finish their medications. She stated that they still have medication left in the bottles. She stated that it is liquid medication. She stated that they did not take the medication at all last week. Ms. ██████ stated that she was the one who administered the medication. Ms. ██████ stated that both children have runny noses at this time. She stated that ██████ has problems with gas. She stated that he takes over the counter gas medication. Ms. ██████ stated that ██████ medications were on the kitchen counter. She stated that if they are not there now, then she is not sure where they are. She stated that he takes a generic Benadryl. She stated that it is in the cabinet above the sink. Ms. ██████ stated that she went to the Dollar General Store today to see if she could find any medications for a runny nose. She stated that she found medicine for ██████ but not ██████. She stated that she got Dimeatap. Ms. ██████ stated that neither child had any medication today. Ms. ██████ stated that she gave the



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

prescription medication to both children 2-3 times. She stated that [REDACTED] took a dose in the morning and a dose at bed time. Ms. [REDACTED] stated that she took her medication before putting [REDACTED] to bed. She stated that she was going to sleep in the same bed as [REDACTED]. Ms. [REDACTED] stated that she did not worry about rolling over on [REDACTED] because she does not move in her sleep. Ms. [REDACTED] stated that she will not watch [REDACTED] or [REDACTED] if she takes her medications and no one else is home. Ms. [REDACTED] stated that [REDACTED] sleeps between her and Mr. [REDACTED] when he sleeps in their bed. Ms. [REDACTED] stated that she has slept with [REDACTED] in the bed before. Ms. [REDACTED] stated that [REDACTED] sleeps in the crib in Ms. [REDACTED] room when she is there. Ms. [REDACTED] stated that she has seen this before. Ms. [REDACTED] stated that she does not take any illegal drugs and that she only takes her prescriptions. She stated that she keeps her medications in the top drawer of her vanity. She stated that she does not have any pill containers sitting out where they are accessible to the children. She stated that in the past, [REDACTED] has gotten her medication and dumped it in the toilet. Ms. [REDACTED] stated that Mr. [REDACTED] is prescribed Paxil and Hydroxyzine. She stated that he has Schizophrenia. Ms. [REDACTED] stated that Ms. [REDACTED] has identified a man named [REDACTED] as [REDACTED] biological father. She stated that she does not know [REDACTED] last name. Ms. [REDACTED] stated that a man named [REDACTED] has also been in [REDACTED] life. She stated that Mr. [REDACTED] was accused of giving [REDACTED] Tylenol to make her sleep. Ms. [REDACTED] stated that Ms. [REDACTED] is not on any medication. She stated that she does not think that Ms. [REDACTED] would test positive for any illegal substances. She stated that she does not have any concerns about Ms. [REDACTED] or Ms. [REDACTED]. She stated that she does not know Mrs. [REDACTED] well, but that she does not like Mr. [REDACTED] because he is uppity. Ms. [REDACTED] reported that she heard while Ms. [REDACTED] was in jail, her boyfriend, [REDACTED] (DOB [REDACTED]), was at the home doing crack, methamphetamines, and pills. Ms. [REDACTED] stated that she does not think that [REDACTED] would have been crawling around on the floor today because he usually stays in his bouncy seat. Ms. [REDACTED] stated that Ms. [REDACTED] had [REDACTED] at the trailer today moving toys and clothes. Ms. [REDACTED] stated that she hauled these things back to her home in her truck.

At this time, [REDACTED] contacted the hospital with information regarding [REDACTED]. Mrs. [REDACTED] reported the following information to Inv. [REDACTED]. Ms. [REDACTED] was at the trailer on [REDACTED] with [REDACTED]. Mr. [REDACTED] has a history of drug use, especially methamphetamine use. Mr. [REDACTED] is also wanted to attempted murder. Recently, Ms. [REDACTED] went by the home and saw lights on. Ms. [REDACTED] pulled up to the home to turn the lights out and Mr. [REDACTED] ran out of the back of the home. It was unknown if Ms. [REDACTED] was at the home at this time.

CM [REDACTED] conducted TFACTS history searches on both families during the interviews. Both Ms. [REDACTED] and Ms. [REDACTED] have involvement with DCS in [REDACTED]. According to the notes in Ms. [REDACTED] case, [REDACTED] was listed as [REDACTED] father. According to TFACTS, Mr. [REDACTED] rights have been terminated on his son, [REDACTED]. It is noted that Mr. [REDACTED] has a lengthy history of drug use. It was noted that [REDACTED] has a heart condition and is scheduled to have heart surgery in October 2013. Notes indicate that Ms. [REDACTED] passed two drug screens, the last one being 6/26/13.

Ms. [REDACTED] has an open case in [REDACTED]. There was an investigation [REDACTED] which was screened out due to an open case.



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: Face To Face
Contact Time: 10:55 PM Contact Duration: Less than 02 Hour
Entered By: [REDACTED] Recorded For:
Location: Hospital Created Date: 08/07/2013
Completed date: 08/07/2013 Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Collateral Contact,Parent/Caretaker Interview
Contact Sub Type:

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/07/2013 02:25 PM Entered By: [REDACTED]

7/10/13 10:45 p.m. [REDACTED]
CMs [REDACTED] and [REDACTED] me [REDACTED] PD Inv. [REDACTED] at this time. CMs and Inv. [REDACTED] spoke to Inv. [REDACTED] with the PD Criminal Investigation Divison. CM was advised of the following:
[REDACTED] is 4 months old. He had been to the pediatrician, which is off of [REDACTED] about 2 weeks ago because he had a cold which had lasted for over a month. [REDACTED] was given an antibiotic while at the hospital and he was out of the antibiotic. The mother, [REDACTED] was not present at the home on this night when the incident occurred. [REDACTED] a family friend that Ms. [REDACTED] identified as grandmother, was watching [REDACTED] was in Ms. [REDACTED] bed, and according to her, there were blankets and pillows in the bed, but not close to [REDACTED] face. Ms. [REDACTED] had reported to PD that she fed [REDACTED] put him to bed, went outside to smoke, and came back in and he was non responsive. Ms. [REDACTED] stated that [REDACTED] was face down at that time. 911 as called and an ambulance arrived at the home. During that time, [REDACTED] Ms. [REDACTED] adult daughter, had started performing CPR on [REDACTED] It was reported that [REDACTED] coded on the way to the hospital. It was reported that [REDACTED] had a faint heartbeat and that he was receiving a shot of adrenaline into his heart or large vein. It was reported that it was unknown how long [REDACTED] had been unresponsive.

CM was provided with the following demographic information:

[REDACTED]

7/10/13 11:30 p.m. [REDACTED]
Ms. [REDACTED] was interviewed in a conference room on the 5th floor of [REDACTED] The following people were present:
PD Inv. [REDACTED]
PD Inv. [REDACTED]
CM [REDACTED]
CM [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Ms. [REDACTED] provided the following demographic information:

[REDACTED]

Ms. [REDACTED] stated that she has resided with Ms. [REDACTED] for 3 weeks. She stated that she used to live at [REDACTED] [REDACTED]. She stated that she lived at that address for 3 years. Ms. [REDACTED] stated that it was just her and her children at that address. She stated that she now lives with family friend, [REDACTED] and Ms. [REDACTED] boyfriend [REDACTED]. Ms. [REDACTED] stated that Ms. [REDACTED] daughter, [REDACTED] and Ms. [REDACTED] daughter, [REDACTED] also reside in the home. Ms. [REDACTED] stated that she has an older child, [REDACTED] who was with her at the time of the incident with [REDACTED] Ms. [REDACTED] stated that Ms. [REDACTED] told her that [REDACTED] was non responsive for 15 minutes. Ms. [REDACTED] stated that she had spent the night in [REDACTED] 7/9/13 (Tuesday night) because she was packing the rest of her belongings. She stated that she was last at Ms. [REDACTED] home on 7/9/13 around noon. She stated that her friend, [REDACTED] ([REDACTED]), came to Ms. [REDACTED] home and picked her up. Ms. [REDACTED] stated that she stayed with Ms. [REDACTED] that night. She stated that she had [REDACTED] with her, but that [REDACTED] stayed with Ms. [REDACTED]. Ms. [REDACTED] stated that Ms. [REDACTED] brought [REDACTED] to her at Ms. [REDACTED] home this morning around 9:00 a.m. because Ms. [REDACTED] had a doctors appointment. She stated that Ms. [REDACTED] came back around 2:30 p.m. and picked up [REDACTED] and a load of her stuff. Ms. [REDACTED] stated that she was back in [REDACTED] at 9:00 p.m. She stated that Ms. [REDACTED] called her when she was at the [REDACTED] by her home, so she did not answer the phone since she was almost home. She stated that was around 9:14 p.m. Ms. [REDACTED] stated that Ms. [REDACTED] pulled into the driveway and Ms. [REDACTED] came running out of the home and told her what had happened. Ms. [REDACTED] stated that both Ms. [REDACTED] and [REDACTED] were with her at this time. She stated that Ms. [REDACTED] ran outside and fell down to her knees. Ms. [REDACTED] stated that all she heard was that [REDACTED] was not breathing, so she ran to Ms. [REDACTED] bedroom. She stated that she saw Ms. [REDACTED] standing by the bed doing CPR on [REDACTED]. She stated that Ms. [REDACTED] was at the edge of the bed in between the bed and the wall, and that Mr. [REDACTED] was on the phone with 911. She stated that he was standing between the bed and the closet. She stated that the 911 operator was on the phone with Mr. [REDACTED] instructing him how to administer CPR and he was telling Ms. [REDACTED]. Ms. [REDACTED] stated that she stopped at the door and started crying. She stated that [REDACTED] walked in and she took him to the living room with Ms. [REDACTED]. Ms. [REDACTED] stated that the ambulance arrived and she went back into the bedroom with the EMTs. She stated that they took over CPR at that point. Ms. [REDACTED] stated that Ms. [REDACTED] kept [REDACTED] in the living room during this. She stated that she was not sure where Ms. [REDACTED] was during this time. Ms. [REDACTED] stated that another ambulance arrived and that they carried [REDACTED] to the ambulance. She stated that she was told to ride in the front of the ambulance on the way to the hospital. She stated that the family followed in the car behind them. Ms. [REDACTED] stated that there were 2 ambulances and 1 fire engine that responded to the home. Ms. [REDACTED] stated that when she saw the bed, there were 2 pillows, possibly red, laying long ways on the bed. She stated that there was also a thick comforter on the bed. Ms. [REDACTED] stated that the bedding was on the opposite side and end of the bed. She stated that [REDACTED] side of the bed was clear. Ms. [REDACTED] stated that [REDACTED] does not move in his sleep. She stated that he does not roll at all. Ms. [REDACTED] stated that she thinks that Ms. [REDACTED] bed is a Queen size bed. She stated that [REDACTED] does not usually sleep in a bed because he is usually in his crib in her room. Ms. [REDACTED] stated that he does not know where [REDACTED] slept Tuesday night. She stated that she figured he was either in the bed or his crib in her room. Ms. [REDACTED] stated that [REDACTED] did go to his pediatrician 2.5 weeks ago. She stated that her sister, [REDACTED] [REDACTED] took [REDACTED]. Ms. [REDACTED] stated that she thought that her sister was 26 years old. She stated that Mrs. [REDACTED] lives off of [REDACTED] in apartments that are by the Pilot. Ms. [REDACTED] stated that Mrs. [REDACTED] had her children while she was in jail. She stated that she has only been out of jail 3 weeks. Ms. [REDACTED] stated that she was out of jail when [REDACTED] went to the doctor, but that she did not go with him because she was applying for jobs online. She stated that she can not remember the exact date, but that she thinks it might have been 6/19/13. She stated that Mrs. [REDACTED] took the children because she had been keeping the children so she knew what was going on with them. Ms. [REDACTED] stated that she knew that Mrs. [REDACTED] made the appointment. She stated that Mrs. [REDACTED] took the children to the appointment, had their prescriptions filled, and brought them home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Ms. [REDACTED] stated that [REDACTED] pediatrician is Dr. [REDACTED] at [REDACTED] Pediatrics [REDACTED] off [REDACTED]. She stated that [REDACTED] went to the doctor because he had a runny nose and eye boogers when he woke up. Ms. [REDACTED] stated that both children went to the doctor then and that they were both given allergy medications. She stated that she was told to give them the medication for 5-7 days. Ms. [REDACTED] stated that neither child had any other symptoms. Ms. [REDACTED] stated that [REDACTED] has not had the medication at all in July because he took them for 5-7 days. She stated that she was the only one who gave [REDACTED] his medication. Ms. [REDACTED] then stated that Ms. [REDACTED] would help with the medications if needed. Ms. [REDACTED] stated that [REDACTED] took the medication twice a day. She stated that it was liquid. Ms. [REDACTED] stated that she only gave him the medication twice and that Ms. [REDACTED] gave him the medication most of the time. She stated that Mrs. [REDACTED] had the children some during this time, so she also gave the medications. Ms. [REDACTED] stated that the medication should still be in the diaper bag, which is green with a giraffe print because she put it in there to come to the hospital. Ms. [REDACTED] stated that she forgot the diaper bag. Ms. [REDACTED] then stated that she was not sure if the medication was supposed to be kept in the refrigerator. Ms. [REDACTED] stated that she did not care if law enforcement looked in the diaper bag while they were at the home. During the interview, a law enforcement official called and advised that the medication was not in the diaper bag. They also reported that they found 2 tablets in the diaper bag that appeared to be Excedrin. Ms. [REDACTED] stated that she was cleaning out her old house today and she found them in the bedroom. She stated that she thought it was Tylenol. Ms. [REDACTED] stated that she put them in the diaper bag so she would remember to throw them away. Ms. [REDACTED] reported that the children were no longer sick, so she did not have to give them the medication. Ms. [REDACTED] stated that the last time she thought she saw the medication was when she put stuff in the diaper bag to come to the hospital. She stated that if its not in the diaper bag, it could be in the refrigerator, or Ms. [REDACTED] could have thrown it out. Ms. [REDACTED] stated that [REDACTED] did not take any over the counter medications today. She stated that he only takes gas drops and Gripe Water. She stated that Gripe Water was for colic and upset stomachs. She stated that she got it at Walgreens. Ms. [REDACTED] reported that [REDACTED] did not have a runny nose and was not congested on this date. She stated that he sat in his bouncy seat for most of the time he was with her. She stated that he was laughing and seemed to be in a good mood.

Ms. [REDACTED] stated that she went to jail on 5/28/13 in [REDACTED]. She stated that she was out of jail on 6/15/13. Ms. [REDACTED] stated that she was arrested for theft at [REDACTED] which was a violation of her probation. She stated that she was on probation because of theft. Ms. [REDACTED] stated that she did not know she had a new charge, and when she went to her probation appointment, she found out she had the new charge. She stated that it was from [REDACTED] on 5/16/13. Ms. [REDACTED] stated that she was not arrested or stopped at [REDACTED] at that time. She stated that she first heard about it at her probation appointment. Ms. [REDACTED] stated that her original theft charge was 5/14/13 from Wal Mart.

Ms. [REDACTED] was asked to describe the events of the day. Ms. [REDACTED] stated that she had [REDACTED] between 9:00 a.m. and 2:30 p.m. She stated that when [REDACTED] got to her home, he was finishing his bottle. She stated that he drank 8 oz. She stated that [REDACTED] normally drinks Good Starts, but that Ms. [REDACTED] accidentally brought [REDACTED] formula, which is Elecare. Ms. [REDACTED] stated that [REDACTED] has food allergies so she is on a special formula. Ms. [REDACTED] stated that she called Ms. [REDACTED] to let her know, and that Ms. [REDACTED] told her that was okay because it was the same thing, just without milk.

Ms. [REDACTED] stated that after she fed [REDACTED] they went to her old house on [REDACTED] around 10:00 a.m. She stated that Ms. [REDACTED] drove them there. Ms. [REDACTED] stated that Ms. [REDACTED] met her at this house later. Ms. [REDACTED] stated that while she and Ms. [REDACTED] were at the old home, they packed up some more of her belongings. She stated that they took an old dog cage to Ms. [REDACTED] mother at [REDACTED] and told it to her. Ms. [REDACTED] stated that then they went to [REDACTED] Mall and sold Ms. [REDACTED] old PSP at a used game store. She stated that Ms. [REDACTED] went into the mall by herself because [REDACTED] was asleep in the car. She stated that she sat in the car with [REDACTED]. She stated that she had [REDACTED] with her at both places at this time and that [REDACTED] was with Ms. [REDACTED]. Ms. [REDACTED] stated that they went back to the old house for about 20 minutes and then they all went to the McDonalds in [REDACTED]. Ms. [REDACTED] stated that she fed [REDACTED] while they were at the home, before they went to McDonalds. Ms. [REDACTED] stated that they met someone at the McDonalds and bought a pill from them for \$35. She stated that they used the money that Ms. [REDACTED] got for the PSP she sold. She stated that Ms. [REDACTED] called her while they were at the McDonalds and said that she was at the old home, so they went back and met her there. Ms. [REDACTED] stated that when they got to the home, Ms. [REDACTED] had everything loaded to take to [REDACTED]. She stated that at this time, [REDACTED] went back with Ms. [REDACTED] and [REDACTED] went back with her. Ms. [REDACTED] stated that this was around 2:30 p.m.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

Ms. ██████ stated that ██████ did have a diaper rash in the front crease of his legs. She stated that he did not have a severe diaper rash and that he did not have any blisters anywhere on him.

Ms. ██████ stated that her worker in ██████ came to her home on ██████ last week to see the home. She stated that CM ██████ told her that she would be closing the case. Ms. ██████ stated that CM ██████ is waiting on records from ██████ to see if ██████ was drug exposed or not. She stated that the tests they ran on ██████ have not come back yet. Ms. ██████ stated that she saw Dr. ██████ at ██████ Ms. ██████ stated that she did use Roxicodone during her pregnancy. She stated that she told CM ██████ this. She stated that she used every other day for the last month of her pregnancy. She stated that she started using during her pregnancy because of back pain. She stated that she got the pills from a friend who got them from a doctor. Ms. ██████ stated that CM ██████ asked her to do an alcohol and drug assessment, but she never completed it. She stated that CM ██████ then told her that she did not have to complete the assessment because she provided a negative drug screen at the last home visit. Ms. ██████ stated that CM ██████ called her the day that she was coming to her home. She stated that she had gone to the DCS office in ██████ before, but Ms. ██████ was not there. She stated that she only met CM ██████ twice. She stated that she met CM ██████ for the first time when she was still pregnant and the other time was when CM ██████ came to her home. Ms. ██████ stated that CM ██████ knew that she was using Roxicodone because she had done half a pill before she met her for the first time.

Ms. ██████ stated that CM ██████ was also working with her because of an incident with her ex boyfriend, ██████ Ms. ██████ stated that Mr. ██████ is not either of the childrens father. She stated that the police came to her home in ██████ because he head butted her and tried to strangle her in front of the children. She stated that ██████ father is ██████ She stated that he is in the ██████ jail. She stated that he is a 24 year old white male. Ms. ██████ stated that ██████ father is ██████ She stated that he is ordered to pay child support, but that he does not. She stated that he is not on the birth certificate. Ms. ██████ that ██████ Child Support Court was supposed to change the name on ██████ birth certificate to ██████ but they have not done so yet.

Ms. ██████ stated that if she was drug screened today, she would test positive for Roxicodone. Ms. ██████ stated that she last used Roxicodone this morning while she was at McDonalds while she had ██████ She stated that she snorted half of the pill in the bathroom. She stated that Ms. ██████ snorted the other half later on. Ms. ██████ stated that Ms. ██████ is pregnant and due next week. She stated that Ms. ██████ has snorted Roxicodone more than the one time while pregnant. Ms. ██████ stated that she only snorts half of a pill, which would be 15 mg. She stated that this was the first time that she had used drugs since being released from jail. CM asked what else Ms. ██████ would be positive for on a drug screen. Ms. ██████ then stated that she injected morphine into the top of her left hand about a week ago. She stated that the children were both with Ms. ██████ when this happened. Ms. ██████ first stated that she was at a friends home in ██████ She then identified her friend as ██████ (██████), which is her uncle. Ms. ██████ then stated that Mr. ██████ injected a substance into her arm on Tuesday (7/9/13). She stated that she thought that the substance was methamphetamine. She stated that she just knew that it was white. Ms. ██████ stated that Ms. ██████ was with her, but she did not use the substance. Ms. ██████ stated that ██████ was in the car when she used the methamphetamine and that ██████ was with Ms. ██████ and Ms. ██████ She stated that when she used the morphine, ██████ was with her. She stated that he was in the living room with his cousin ██████ and his girlfriend, ██████ She then stated that was not true and that both children were with ██████ who is ██████ paternal grandmother. Ms. ██████ stated that Ms. ██████ lives at ██████ in ██████ She stated that she went to visit Ms. ██████ first, and ██████ started crying for Ms. ██████ so she let him stay. Ms. ██████ stated that Ms. ██████ asked if she could keep ██████ too.

Ms. ██████ stated that ██████ was unresponsive once when he was one year old. She stated that although he was unresponsive, he was still breathing. She stated that this lasted for about 36 hours. She stated that he was at her sisters home when this started. Ms. ██████ stated that she did not have concerns about Ms. ██████ watching ██████ She stated that Ms. ██████ is on night medications, but that she will not keep ██████ by herself when she takes her medications. She stated that Ms. ██████ does not drink.

Ms. ██████ stated that her biological parents are ██████ and ██████ but that they are deceased. She stated that ██████ and ██████ are her adoptive parents. Ms. ██████ would not provide CM with their contact information. She stated that her adopted siblings are ██████ and ██████ which are both children. She stated that she has a sister named ██████ that she does not have contact with. She stated that her other sister is ██████



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Ms. [REDACTED] stated that she is not working. She reported that she does not have any mental health history. She stated that she does not have any medical problems and is not on any regular medications. She stated that [REDACTED] is not in daycare. She stated that neither child has any allergies that she is aware of. Ms. [REDACTED] stated that she receives food stamps and TN Care. She stated that she had to go to [REDACTED] once before she was adopted, but that she does not remember why. She stated that she is not on any prescribed medication. Ms. [REDACTED] stated that she does not have any communicable diseases.

Ms. [REDACTED] stated that family friend, [REDACTED] ([REDACTED]) had taken [REDACTED] from the hospital and was taking her to Mrs. [REDACTED] home.

Ms. [REDACTED] submitted to a drug screen at this time. Ms. [REDACTED] was positive for Opiates, Oxycodone, Methamphetamines, and Amphetamines. Ms. [REDACTED] stated that she wanted [REDACTED] to stay with Mrs. [REDACTED]

At this time, a call was received from [REDACTED] PD who was at the home. It was reported that the family had over the counter childrens allergy medication in the cabinet in the kitchen. It was also reported that there Ranitidine (generic Zantac) for reflux. It was reported that there was no vomit or fluid on the bed where [REDACTED] had been. Mr. [REDACTED] reported that Ms. [REDACTED] put [REDACTED] to bed around 8:30 p.m. He stated that around 9:00 a.m., Ms. [REDACTED] went into the room and she yelled that [REDACTED] was blue.

CM [REDACTED] contacted Ms. [REDACTED] at this time. Ms. [REDACTED] advised CM [REDACTED] that she had taken [REDACTED] to Mrs. [REDACTED] home. Ms. [REDACTED] stated that she knows Ms. [REDACTED] because they used to work together. She stated that Ms. [REDACTED] told her that her mother had thrown her out of the home, so she did not have a place to stay. Ms. [REDACTED] stated that she gave Ms. [REDACTED] a place to stay while she was pregnant with [REDACTED]. Ms. [REDACTED] stated that Ms. [REDACTED] would not do anything to hurt [REDACTED]. CM [REDACTED] contacted Mrs. [REDACTED] at this time. Mrs. [REDACTED] confirmed that she had [REDACTED] at her home. Mrs. [REDACTED] reported that she would be in agreement with keeping [REDACTED] as long as needed. Mrs. [REDACTED] reported the following information to CM [REDACTED]

Mrs. [REDACTED] stated that Mr. [REDACTED] child, [REDACTED] (DOB [REDACTED]). She stated that they have [REDACTED] half of the time. She stated that [REDACTED] is at their home every Friday through Monday and every other Tuesday. Mrs. [REDACTED] stated that she has a medical and educational Power of Attorney over the children.

Mrs. [REDACTED] stated that Mr. [REDACTED] has a PI charge from about a year ago when he was drunk in his grandfathers driveway. CM [REDACTED] contacted TL [REDACTED] for a Code X.

TL [REDACTED] reported that Mr. [REDACTED] had the PI plus a DUI charge and because of this, the [REDACTED] could not be a placement option.

During the interview, Dr. [REDACTED] (ICU Dr.) came into the room with an update on [REDACTED]. Dr. [REDACTED] stated that they were putting an IV in [REDACTED] left leg, and a special IV in an artery in his right leg. He stated that [REDACTED] pupils were reactive and that he has taken a few breaths on his own. He stated that [REDACTED] had acid in his blood, which is caused by shock or trauma. He reported that the level of acid in [REDACTED] blood could potentially make his heart stop. He reported that they were able to turn the adrenaline down a bit. Dr. [REDACTED] reported that [REDACTED] pupils were reactive at this point. He reported that [REDACTED] was very critical at this point.



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: 07/10/2013 Contact Method:
 Contact Time: 10:00 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 08/07/2013
 Completed date: 08/07/2013 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: 08/07/2013 02:23 PM Entered By: [REDACTED]
 Child: [REDACTED] DOD: 7/15/13
 Child: [REDACTED]
 Mother: [REDACTED]
 Father: [REDACTED] (of [REDACTED])
 Address: [REDACTED] (last known address)
 Phone: [REDACTED]

REFERRAL AND REFERRANT:

TFACTS:
 Family ID: [REDACTED]
 Open Court Custody/FSS/FCIP No
 Closed Court Custody No
 Open CPS - 2/14/13, # [REDACTED] DEC, CM [REDACTED]
 Indicated No
 Fatality No
 Screened out None or Total number of screen outs - 3
 History (not listed above):
 6/25/13, # [REDACTED] DEI, Unfounded
 Closed FCIP: # [REDACTED] 4/12/07-5/17/07

DUPLICATE REFERRAL: No

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

Reporters name/relationship: [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Reporter states: [REDACTED] (2) and [REDACTED] (3 months) reside with their mother, [REDACTED] in addition to family friends, [REDACTED] boyfriend, [REDACTED] and [REDACTED] daughter, [REDACTED] (21).

On 07/10/2013 around 9:34pm [REDACTED] contacted 911 due to [REDACTED] finding [REDACTED] unresponsive in her bed. While [REDACTED] was on the phone [REDACTED] was performing CPR on [REDACTED] after [REDACTED] failed attempts. [REDACTED] reported that she fed [REDACTED] a bottle of formula then laid him down in her bed (stomach down) and put blankets around him. [REDACTED] said she placed the blankets so [REDACTED] would not fall off the bed and then she went outside to smoke a cigarette (gone about 10-15 minutes) and when she returned [REDACTED] was face down on his stomach.

[REDACTED] was transported to [REDACTED] Childrens Hospital, but during the transport EMS called LE to report that [REDACTED] was still unresponsive. [REDACTED] is currently in the NICU at [REDACTED] Childrens Hospital and medical staff (Dr. [REDACTED] report that [REDACTED] chest X-Rays were clear, but there are some signs of brain injuries but no bleeding.

The mother and [REDACTED] were not in the home during the time of incident and [REDACTED] was left to care for [REDACTED] It was reported that [REDACTED] can roll from his stomach to his back but not his back to his stomach.

It is unknown if [REDACTED] had any bruises on his body, photographs of [REDACTED] may have been taken, but photographs were taken of the home. The referent was not present in the family home so they cannot comment on the conditions.

The referent states that LE contacted DCS and the case was assigned to [REDACTED] [REDACTED] [REDACTED] [REDACTED] the mother and the mothers friend, [REDACTED] [REDACTED] were interviewed at the hospital. [REDACTED] did not come to the hospital, but he was interviewed by Violent Crimes Unit at the home.

It is unknown if the children have any special needs or disabilities. In the past two weeks both children have been seen by their pediatrician for sinus infections and were giving medication for treatment.

The family address is listed under the oldest child in the home.

Per SDM: P1-Investigation

[REDACTED], CM2 07-11-2013 9:37am

[REDACTED] CM3.

County Notified at 10:03 am CST on 7/11/13.

Child Fatalities Group (CI Director [REDACTED])

[REDACTED] notified at 10:04 am CST on 7/11/13.

CASE ASSIGNMENT:

This case came to the attention of the Department on 7/10/13 at 10:02 p.m. (CST) and was assigned to CM [REDACTED] on 7/10/13 at 10:05 p.m. (CST) as a P1 with the response due on 7/11/13. Referent notification was made by mail on the date of assignment. A copy of such notification is contained within the file. Severe Abuse Notification is made to the District Attorneys Office by DCS secretarial staff. A copy of such notification is contained within the file. Notification is made monthly to the Juvenile Court Judge (by DCS secretarial staff) as requested per Juvenile Court Judge [REDACTED]

This case was not received at CI until 7/11/13 at 10:05 a.m. (CST); EMTs were called to the home due to the condition of the child and late [REDACTED] PD was called to the scene. Immediate assistance was requested.

BACKGROUND:

Tennessee Bureau of Investigation Sex Offender Registry search: CM [REDACTED] searched the database for [REDACTED] [REDACTED] No results were found. A copy of such finding is contained within the hard file. CM also conducted a national sexual



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

offender search. No results were found.

Tennessee Bureau of Investigation Meth Offender Registry search: CM [REDACTED] searched the database for [REDACTED] [REDACTED] CM found No results were found. A copy of such finding is contained within the hard file.

Tennessee Felony Offender search: CM [REDACTED] searched the database for [REDACTED] [REDACTED] No results were found. A copy of such finding is contained within the hard file.

Health Abuse Offender search: CM [REDACTED] searched the database for [REDACTED] [REDACTED] . No results were found. A copy of such finding is contained within the hard file.

Background Check: A request was submitted to General Sessions Court regarding a background check on the family.

Background Check Results: There were no results.

: CM conducted a TFACTS history search on this family. CM found the following:
2/13/13 [REDACTED] Victim: [REDACTED] [REDACTED] allegation: DEC; alleged perp: [REDACTED] [REDACTED] Svc. Rec. and Acc.: [REDACTED]
assessment



Family Functional Assessment

Case Name: _____ Case ID: _____
 Primary Case Worker: _____ Begin Date: 07/11/2013
 Last Review By: _____ Last Review Date: _____

I. Current Circumstances:

A. Reason For Involvement:

07/11/2013 - [REDACTED] R - FFA - Family - CPS received a referral on 02/13/2013 with allegations of Drug Exposed Child pertaining to [REDACTED] with his mother, [REDACTED] as the alleged perpetrator.
 Reporter states:

[REDACTED] (2) resides with his mother [REDACTED] in [REDACTED]. The reporter received the following statement:
 I would like for you to call Department of Children and Family Services. I would like to report my friend [REDACTED] [REDACTED] [REDACTED]). She is 8 months pregnant possibly with my child. She is selling and using pain pills out of the home with a child [REDACTED] (2 years) old already living there. I would like them to investigate this immediately. I would like to be anonymous to them. Please and thank you.

B. Family Story:

07/11/2013 - [REDACTED] R - FFA - [REDACTED] - [REDACTED] initially reported that she does not use drugs and reported that she is not on any narcotic medications. CM [REDACTED] asked [REDACTED] to complete a drug screen. [REDACTED] then reported that she would be positive for Roxycodone. [REDACTED] tested positive for Oxycodone on 2/14/2013. [REDACTED] reported that she has been in a lot of pain from her pregnancy and last took a Roxycodone yesterday morning. [REDACTED] reported that she takes them every now and then and has been taking them at random for the past two weeks. [REDACTED] reported that she has been buying them off the street but that she rarely buys them. [REDACTED] reported that she usually only buys one pill at a time. [REDACTED] reported that she took a Roxycodone the other day because she was hurting so bad that morning and took it when she woke up. [REDACTED] reported that she only takes the Roxycodone when she is in pain. [REDACTED] reported that she has taken Roxycodone a couple of times a week during her pregnancy for the past couple of months. [REDACTED] reported that she has had prior prescriptions for Hydrocodone and Percocets in the past. [REDACTED] reported that she had surgery in November to have her gallbladder removed. [REDACTED] reported that when she takes the Roxycodone, she has always taken it by mouth. [REDACTED] did not display any indicators that she was impaired or intoxicated on this date. CM [REDACTED] did not observe any paraphernalia or any other indicators of illicit drug use in the home. [REDACTED] was coherent during the visit and was very compliant and cooperative with CM [REDACTED] and was also very receptive to receiving services to address any drug issues.

II. Assessment of Family Strengths and Needs/Risks:

A. Family Significant Strengths:

07/11/2013 - [REDACTED] R - FFA - Family - [REDACTED] loves her son very much.
 [REDACTED] is a very intelligent child.
 [REDACTED] is healthy and happy.
 -The family has safe and stable housing.
 -The family has safe and stable transportation.
 -The family has good extended family support.

B. Family Significant Needs/Risks/Concerns:

07/11/2013 - [REDACTED] R - FFA - [REDACTED] - [REDACTED] tested positive for Oxycodone on 2/14/2013.
 [REDACTED] admitted to taking Roxycodone without a valid prescription and last took one yesterday morning.

III. Person Information:

A. Children:

07/11/2013 - [REDACTED] R - FAST - [REDACTED] - [REDACTED] is a healthy and happy 2 year old little boy. [REDACTED] is developmentally on track and the mother reported that [REDACTED] is very intelligent. [REDACTED] is well bonded with his mother and appeared to be comfortable in his home environment. [REDACTED] father is [REDACTED] and is currently reported to be in the [REDACTED] Jail and to not have played a significant role in [REDACTED] life. There are no known medical, mental or any other concerns or issues regarding [REDACTED] at this time.

07/11/2013 - [REDACTED] R - FFA - [REDACTED] - [REDACTED] is a healthy and happy 2 year old little boy. [REDACTED] is developmentally on track and the mother reported that [REDACTED] is very intelligent. [REDACTED] is well bonded with his mother and appeared to be comfortable in his home environment. [REDACTED] father is [REDACTED] and is currently reported to be in the [REDACTED] Jail and to not have played a significant role in [REDACTED] life. There are no known medical, mental or any other concerns or issues regarding [REDACTED] at this time.

B. Adults:

07/11/2013 - [REDACTED] R - FAST - [REDACTED] - [REDACTED] is the biological mother of [REDACTED]. [REDACTED] was incarcerated in May 2013 due to a violation of her probation for shoplifting. [REDACTED] was released from jail on June 17, 2013 and has since moved to [REDACTED] TN with a close family friend due to being evicted from her home after going to jail. [REDACTED] gave birth to her son, [REDACTED] on March 19, 2013. [REDACTED] does have a known history of illegal drug use as she tested positive for Oxycodone on 2/14/2013 and admitted that she does not have a valid prescription and was taking Roxycodone randomly due to pain. An NCPP was developed with [REDACTED] to address the issues of her drug use and [REDACTED] was very cooperative and receptive to receiving services. [REDACTED] was given a random drug screen on 6/20/2013 and was negative for all substances.

07/11/2013 - [REDACTED] R - FFA - [REDACTED] - [REDACTED] is the biological mother of [REDACTED]. [REDACTED] was incarcerated in May 2013 due to a violation of her probation for shoplifting. [REDACTED] was released from jail on June 17, 2013 and has since moved to [REDACTED] with a close family friend due to being evicted from her home after going to jail. [REDACTED] gave birth to her son, [REDACTED] on March 19, 2013. [REDACTED] does have a known history of illegal drug use as she tested positive for Oxycodone on 2/14/2013 and admitted that she does not have a valid prescription and was taking Roxycodone randomly due to pain. An NCPP was developed with [REDACTED] to address the issues of her drug use and [REDACTED] was very cooperative and receptive to receiving services. [REDACTED] was given a random drug screen on 6/20/2013 and was negative for all substances.

C. Family Together History:

07/11/2013 - [REDACTED] R - FAST - [REDACTED] - [REDACTED] is currently residing with his biological mother, [REDACTED]. The family was residing together at [REDACTED] but [REDACTED] was incarcerated at the end of May 2013 and was evicted from her residence. [REDACTED] is now residing with a close family friend in at [REDACTED].

07/11/2013 - [REDACTED] R - FFA - Family - [REDACTED] is currently residing with his biological mother, [REDACTED]. The family was residing together at [REDACTED] but [REDACTED] was incarcerated at the end of May 2013 and was evicted from her residence. [REDACTED] is now residing with a close family friend in at [REDACTED].

D. Other Significant Relationships:

E. Legal/Court/DCS History:

Intake ID		Decision Date / Time		Intake Type	Investigation ID/ Assessment ID
[REDACTED]		[REDACTED]		CPS	[REDACTED]
[REDACTED]		[REDACTED]		CPS	[REDACTED]
Action Date	Action Category	Action Type	Court Docket #	Action Concerning	Additional Info

07/11/2013 - [REDACTED] R - FFA - [REDACTED] - [REDACTED] is currently on probation with the [REDACTED] Adult Probation with probation officer [REDACTED] was convicted of Shoplifting in May and also accrued another Shoplifting charge and was violated on her probation on May 28, 2013. [REDACTED] was released from jail on June 17, 2013. [REDACTED] will be on probation with the [REDACTED] Adult Probation until May 13, 2014.

IV. Assessment of Safety:

07/11/2013 - [REDACTED] R - Safety - [REDACTED] - [REDACTED] initially reported that she does not use drugs and reported that she is not on any narcotic medications. CM [REDACTED] asked [REDACTED] to complete a drug screen. [REDACTED] then reported that she would be positive for Roxycodone. [REDACTED] tested positive for Oxycodone on 2/14/2013. [REDACTED] reported that she has been in a lot of pain from her pregnancy and last took a Roxycodone yesterday morning. [REDACTED] reported that she takes them every now and then and has been taking them at random for the past two weeks. [REDACTED] reported that she has been buying them off the street but that she rarely buys them. [REDACTED] reported that she usually only buys one pill at a time. [REDACTED] reported that she took a Roxycodone the other day because she was hurting so bad that morning and took it when she woke up. [REDACTED] reported that she only takes the Roxycodone when she is in pain. [REDACTED] reported that she has taken Roxycodone a couple of times a week during her pregnancy for the past couple of months. [REDACTED] reported that she has had prior prescriptions for Hydrocodone and Percocets in the past. [REDACTED] reported that she had surgery in November to have her gallbladder removed. [REDACTED] reported that when she takes the Roxycodone, she has always taken it by mouth. [REDACTED] did not display any indicators that she was impaired or intoxicated on this date. CM [REDACTED] did not observe any paraphernalia or any other indicators of illicit drug use in the home. [REDACTED] was coherent during the visit and was very compliant and cooperative with CM [REDACTED] and was also very receptive to receiving services to address any drug issues.

07/16/2013 - [REDACTED] R - Safety - [REDACTED] - [REDACTED] -

03/17/2014 - [REDACTED] - Safety - [REDACTED] - [REDACTED] -

07/11/2013 - [REDACTED] R - FFA - Family - [REDACTED] initially reported that she does not use drugs and reported that she is not on any narcotic medications. CM [REDACTED] asked [REDACTED] to complete a drug screen. [REDACTED] then reported that she would be positive for Roxycodone. [REDACTED] tested positive for Oxycodone on 2/14/2013. [REDACTED] reported that she has been in a lot of pain from her pregnancy and last took a Roxycodone yesterday morning. [REDACTED] reported that she takes them every now and then and has been taking them at random for the past two weeks. [REDACTED] reported that she has been buying them off the street but that she rarely buys them. [REDACTED] reported that she usually only buys one pill at a time. [REDACTED] reported that she took a Roxycodone the other day because she was hurting so bad that morning and took it when she woke up. [REDACTED] reported that she only takes the Roxycodone when she is in pain. [REDACTED] reported that she has taken Roxycodone a couple of times a week during her pregnancy for the past couple of months. [REDACTED] reported that she has had prior prescriptions for Hydrocodone and Percocets in the past. [REDACTED] reported that she had surgery in November to have her gallbladder removed. [REDACTED] reported that when she takes the Roxycodone, she has always taken it by mouth.

V. Assessment of Well Being:

07/11/2013 - [REDACTED] R - FFA - [REDACTED] - [REDACTED] is a healthy and happy 2 year old little boy. [REDACTED] is developmentally on track and the mother reported that [REDACTED] is very intelligent. [REDACTED] is well bonded with his mother and appeared to be comfortable in his home environment. [REDACTED] father is [REDACTED] and is currently reported to be in the [REDACTED] Jail and to not have played a significant role in [REDACTED] life. There are no known medical, mental or any other concerns or issues regarding [REDACTED] at this time.

VI. Assessment of Permanence:

VII. Assessment of Resources:

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

Date

Supervisor's Signature

Date



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker:

Date of Referral: 2/13/13 2:21 PM

Date of Assessment: 2/14/13 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):
- Serious injury or abuse to child other than accidental.
- Death of a child due to abuse or neglect.
- Care taker fears that s/he will maltreat the child.
- Threat to cause harm or retaliate against the child.
- Excessive discipline or physical force.
- Drug-affected infant/child.
- Methamphetamine lab exposure.
2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
4. Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.
5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
9. Domestic violence exists in the home and poses a risk of serious physical and/or emotional harm to the child.



Tennessee Department of Children's Services

SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

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

Protective Custody Interventions:

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



Tennessee Department of Children's Services
SDM™ Safety Assessment

Section 3: Safety Decision

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

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



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker:

Date of Referral: 2/13/13 2:21 PM

Date of Assessment: 7/16/13 12:00 AM

Assessment Type: [] Initial [X] Closing [] Other

Number of Children in the Household: 1

Section 1: Immediate Harm Factors

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

Yes No

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



Tennessee Department of Children's Services

SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

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

Protective Custody Interventions:

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



Tennessee Department of Children's Services
SDM™ Safety Assessment

Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

Case Manager: _____

Date: _____

Team Leader: _____

Date: _____