



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

**Intake**

Intake ID: [REDACTED]  
Intake Taken By: [REDACTED] Intake Date/Time: 07/19/2013 11:12 PM CT  
Track Assigned: Investigation Priority Assigned: 1  
Screened By: [REDACTED]  
Date Screened: 07/20/2013

**Investigation**

Investigation ID: [REDACTED]  
First County/Region: [REDACTED]  
Date/Time Assigned : 07/20/2013 11:54 AM  
First Team Leader Assigned: [REDACTED] Date/Time 07/22/2013 12:00 AM  
First Case Manager [REDACTED] Date/Time 07/22/2013 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	2 Yrs 4 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother

**Referent(s)**

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

Family Case IDs: [REDACTED] and [REDACTED]

Open Court Custody/FSS/FCIP No  
Closed Court Custody None Found  
Open CPS - YES\*\* [REDACTED] DEC/NUN/06-22-13/Alleged Perp. [REDACTED] CM [REDACTED]  
Indicated 02-25-05 [REDACTED] SEE/LOS/SSA [REDACTED] \*\* 01-20-05 [REDACTED] SRP [REDACTED]  
Fatality No Prior  
Screened Outs 4  
History ( not listed above): 02-14-12 [REDACTED] PHA/MDM/No Services Needed \*\* 12-04-11 [REDACTED] DEI/No Services Needed \*\*06-23-06/ [REDACTED] ABN/Unfounded \*\* 11-19-04 [REDACTED] /ENN/Unfounded \*\* 05-21-04 [REDACTED] ENN/Services Recommended and Accepted \*\* 05-06-08 [REDACTED] SEE/Unfounded



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

DUPLICATE REFERRAL: No

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

Reporters name/relationship: [REDACTED]

Reporter states: [REDACTED] (1), [REDACTED] (7), and [REDACTED] (4) live with their mother, [REDACTED]  
[REDACTED]

[REDACTED] Police Department contacted [REDACTED] on call worker around 6:30pm to report a child fatality. The on call worker made the scene at [REDACTED] Center around 7pm. The referent spoke with Investigator [REDACTED] and [REDACTED] disclosed to the referent that today all the children were up dancing and playing and a neighborhood girl even came to the home to play. [REDACTED] reports that around 1pm or 2pm she made a sippie cup for [REDACTED] and allowed [REDACTED] to put her to bed. [REDACTED] stated that [REDACTED] placed [REDACTED] in the toddler bed located in the bedroom. [REDACTED] reported about an hour or two past and she went to check on [REDACTED] and did not see her in the room. [REDACTED] reports that she became worried and searched the home. [REDACTED] reports that she reentered [REDACTED] and [REDACTED] bedroom and found [REDACTED] in between the wall and the large bed in the room. [REDACTED] reported that [REDACTED] was lifeless. [REDACTED] reports that she ran to the neighbors home to call 911 and then administered CPR by instructions of the 911 operator. [REDACTED] reported that the larger bed did have spacing from the wall. [REDACTED] stated that [REDACTED] normal routine when she woke was to run around her room and play.

[REDACTED] had a darker mark on her forehead that medical staff stated could have been caused from her laying between the wall and the bed.

Officers found small amounts of Marijuana and drug paraphernalia (spoons) in the night stand beside [REDACTED] bed. The spoons were not reported to be burnt or having residue on them. [REDACTED] has not been drug tested at this time. [REDACTED] had to receive medical treatment at the hospital because she was extremely upset. [REDACTED] has returned home. [REDACTED] and [REDACTED] are presently with family friends, [REDACTED] and [REDACTED] live at [REDACTED] in [REDACTED] phone contact is [REDACTED]. [REDACTED] agreed that the children go with [REDACTED] and [REDACTED] due to prior arrangements for the children to stay the weekend with [REDACTED] and [REDACTED] prior to this incident.

Law Enforcement will continue to work the neglect death case. DCS and Law Enforcement will speak with [REDACTED] tomorrow 07-20-13 at the family home. An autopsy will be conducted on 07-20-13.

No special needs or disabilities are known.

Sex Offender Registry: N/A

TFACTS has [REDACTED] listed as [REDACTED]

Per SDM: Investigative Track, P1. On Call worker [REDACTED] has responded.

P1, [REDACTED] TL, on 7/20/13 @ 1:51 A.M.

CHILD FATALITY E-MAIL NARRATIVE SENT TO:  
[REDACTED]



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





**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: 8 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**

**Name:** [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 4 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**Name:** [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: Black/African Age: 2 Yrs 4 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**

**Name:** [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 2 Yrs 4 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



**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: 25 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

A. Investigation

Case Name: [Redacted]

Investigation ID: [Redacted]

Referral Date: 07/19/2013

Assignment Date: 07/22/2013

Street Address: [Redacted]

City/State/Zip: [Redacted]

B. Allegation

Table with 9 columns: #, Children's Name, DOB/SSN, Specific Allegation for Each Child, Alleged Perpetrator's Name, DOB/SSN, Classification, Severe Abuse, Classified By/Classified Date. Contains 3 rows of allegations.

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments:

D. Case Workers

Case Worker: [Redacted]

Date: 02/27/2014

Team Leader: [Redacted]

Date: 03/04/2014

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 deceased lying in the emergency room hospital bed. The nurses were no longer attending to the child but were in the room with her. [Redacted] was swaddled in a blanket with only her face showing. CPSI noticed on her face that she had a long discolored mark on the side of her forehead about 2 inches long. There were no other concerns and at this time it was believed the child died of asphyxiation.

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



**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]

2/26/14 CPIT Classification Meeting: This case was presented to Child Protective Investigative Team for classification. It was determined that the case is UnSubstantiated for Neglect Death. However, other allegations were presented to CPIT on this day. [REDACTED] was Substantiated for Allegations of Drug Exposed Child and Lack of Supervision. [REDACTED] was positive on a drug screen for Benzos, THC and Opiates. The autopsy showed the death to be an accident.

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

[REDACTED] reported they had woken up around noon and everything was normal. She advised that she fixed chocolate chip pancakes for the children and allowed a neighborhood child to come over to dance and play. [REDACTED] said she did not normally watch other children but did on this day. They were playing together and described them watching movies in the living room. Since it was time for [REDACTED] bed time, [REDACTED] then told [REDACTED] to lay [REDACTED] to sleep with a sippie cup (Tea) in her toddler bed around 1 or 2pm. She stated she then went back in the room a few hours later and could not find [REDACTED] in the room. [REDACTED] then saw that [REDACTED] was wedged between the wall and bed. She appeared lifeless and ran to the neighbor to get help.

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

According to [REDACTED] (sibling), she said that she laid her sister down for a nap and she gave [REDACTED] a sippy cup. [REDACTED] advised that after she laid her sister down for a nap, she watched movies on her mothers phone in the living room. When asked what she did after she watched this movie, she stated that she watched another one with her sister [REDACTED]

CPSI then asked where her mother was when she was watching a movie and she replied that her mother was in her bedroom. [REDACTED] stated that she was on her phone in her bedroom and could have been listening to music also. After some time went by watching movies, [REDACTED] then went to her mothers room to ask why [REDACTED] was still sleeping. [REDACTED] stated this is when [REDACTED] went to her sisters room and saw [REDACTED] not moving on the floor at the foot of the bed (She was able to identify where the child was lying by a diagram of the room.) Inv. [REDACTED] then questioned [REDACTED] about where she saw her sister and [REDACTED] stated that her mother went in the room first. CPSI asked [REDACTED] if the door was open or shut when she left the room, and [REDACTED] explained that she keeps the door shut because [REDACTED] will run out of the room if the door is left open.

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

2/27/14 Closing Summary: This case came to the attention of the Department on 7/19/13 with allegations of Neglect Death. Allegations were added when this investigation concluded. It was alleged that the police were called to [REDACTED] (mother) home because her daughter, [REDACTED] (1) had been found lifeless between the wall and bed. The child was pronounced deceased at 6:32pm on this day. Upon further investigation it was learned that Officers found a crack spoon and marijuana seeds on [REDACTED] bedside table. [REDACTED] was later interviewed about her illicit drug use and admitted to doing morphine two days before this incident. A hair follicle was completed and showed [REDACTED] to be positive for Oxycodone, Hydrocodone and THC. [REDACTED] denied doing anything to cause [REDACTED] death. She advised [REDACTED] was found face down and was not sick prior to the incident. [REDACTED] had 2 siblings named [REDACTED] (7) and [REDACTED] (4) that was with her and her mother on 7/19. [REDACTED] reported that she played and watched a couple movies while [REDACTED] was taking a nap. She stated her mother was in her bedroom on her phone when [REDACTED] was taking a nap. A neighbor confirmed [REDACTED] and [REDACTED] were running from both apartments while [REDACTED] was sleeping. The Autopsy concluded to the child's death as being an Accident. However, the Department Substantiated the Allegations of Drug Exposed Child and Lack of Supervision against [REDACTED]

Distribution Copies:



**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]

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:	02/27/2014	Contact Method:	
Contact Time:	05:20 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	02/27/2014
Completed date:	02/27/2014	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: 02/27/2014 04:27 PM Entered By: [REDACTED]

2/27/14 Closing Summary: This case came to the attention of the Department on 7/19/13 with allegations of Neglect Death. Allegations were added when this investigation concluded. It was alleged that the police were called to [REDACTED] (mother) home because her daughter, [REDACTED] (1) had been found lifeless between the wall and bed. The child was pronounced deceased at 6:32pm on this day. Upon further investigation it was learned that Officers found a crack spoon and marijuana seeds on Ms. [REDACTED] bedside table. Ms. [REDACTED] was later interviewed about her illicit drug use and admitted to doing morphine two days before this incident. A hair follicle was completed and showed Ms. [REDACTED] to be positive for Oxycodone, Hydrocodone and THC. Ms. [REDACTED] denied doing anything to cause [REDACTED] death. She advised [REDACTED] was found face down and was not sick prior to the incident. [REDACTED] had 2 siblings named [REDACTED] (7) and [REDACTED] (4) that was with her and her mother on 7/19. [REDACTED] reported that she played and watched a couple movies while [REDACTED] was taking a nap. She stated her mother was in her bedroom on her phone when [REDACTED] was taking a nap. A neighbor confirmed [REDACTED] and [REDACTED] were running from both apartments while [REDACTED] was sleeping. The Autopsy concluded to the child's death as being an Accident. However, the Department Substantiated the Allegations of Drug Exposed Child and Lack of Supervision against [REDACTED]

SERVICES ARE that [REDACTED] and [REDACTED] were placed in Kinship Foster care with Mr. and Mrs. [REDACTED] (family friend). They had cared for the children many times before the Department became involved. Due to the children's behaviors, services were provided to both of the children.

2/27/14 740: A copy of the Classification and Summary will be submitted to LI [REDACTED] for review. Upon approval, a copy is then sent by LI [REDACTED] to the Juvenile Court Judge.



**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: 02/26/2014

Contact Method: Correspondence

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 02/27/2014

Completed date: 02/27/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 02/27/2014 03:07 PM      Entered By: [REDACTED]

2/26/14 CPIT Classification Meeting: This case was presented to Child Protective Investigative Team for classification. It was determined that the case is UnSubstantiated for Neglect Death.

However;

Other allegations were presented to CPIT on this day. [REDACTED] was Substantiated for Allegations of Drug Exposed Child and Lack of Supervision.



**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: 02/10/2014

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 02/27/2014

Completed date: 02/27/2014

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Medical Exam

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 02/27/2014 03:51 PM Entered By: [REDACTED]

2/10/14

Autopsy report was faxed to the DCS office on this day. This exam was completed by Dr. [REDACTED] MD. The Summary on the front page stated the following:

The distance between the wall and the mattress of the bed was approximately 3.0 inches which explains the inability of the child to breath and cry for help. No other suspicious circumstances were indicated during the initial scene investigation. The main cause of death is asphyxia to wedging between the wall and the mattress. The manner of death is accident.

DCS Nurse [REDACTED] reviewed the Autopsy documents. She responded and stated their were no issues of neglect noted in the documents. CPSI [REDACTED] asked about any drug use found in the body and she stated there was no drugs found. Mrs. [REDACTED] could not find any issues concerning neglect.



**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: 10/04/2013

Contact Method:

Contact Time: 04:15 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/04/2013

Completed date: 10/04/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 10/04/2013 03:28 PM      Entered By: [REDACTED]

This case is not classified or closed, even though it is overdue, due to the final autopsy not being completed yet.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/19/2013

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original

Entry Date/Time: 09/21/2013 12:18 PM

Entered By: [REDACTED]

Date of Referral: 7/19

Allegations: Neglect Death

Perp: [REDACTED]

Case Status:

Fatality where the ACV was wedged between the wall and the mattress. The mother admitted to substance abuse problems. The children were placed with [REDACTED] and [REDACTED], family friends of the mother. The [REDACTED] are currently going through PATH to become a Foster Home for the Children.

Plan:

Waiting on Final Autopsy



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/29/2013 Contact Method: Face To Face  
 Contact Time: 04:30 PM Contact Duration: Less than 01 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Caretaker Home Created Date: 09/22/2013  
 Completed date: 09/22/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): ACV Interview/Observation,Sibling Interview/Observation  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/22/2013 01:04 PM Entered By: [REDACTED]

8/29/13 4:30

CPSI [REDACTED] went to the home of [REDACTED] in order for the [REDACTED] to sign more papers concerning [REDACTED] Foster Care Placement.

FF with [REDACTED] and [REDACTED] by CPSI [REDACTED]

CPSI spoke to the children while they were eating soup and crackers at the kitchen table. [REDACTED] was viewed helping her sister crumble crackers and told CPSI that she learned this herself and then said Mr. [REDACTED] had taught her this. [REDACTED] said she is going to [REDACTED] Elementary and enjoys going there. She says she is making friends and showed CPSI [REDACTED] a picture that she drew at school. It was also found that [REDACTED] was talking back to Mrs. [REDACTED] but would listen to Mr. [REDACTED]. [REDACTED] showed CPSI her new shoes that lit up when tapped.

[REDACTED] was more quiet than [REDACTED] but was very active. She was interested in the the same subjects as her sister and would show CPSI other things that she was interested in.

\*\*\*\*\*

Mr. and Mrs. [REDACTED] signed the documents that were needed for [REDACTED] Foster Care. They stated that Ms. [REDACTED] had not set up [REDACTED] contact. Mrs. [REDACTED] stated that the mother would set up the first contact at [REDACTED] and then Mrs. [REDACTED] would follow up. This had not been done on this day. The [REDACTED] were concerned that Ms. [REDACTED] was not going to set up visitation and would not get to see the children. Mrs. [REDACTED] asked many questions about the next steps for Kinship foster care and told her that someone from the Department would be talking further about these steps. They still believed that [REDACTED] visitation was the best for them and the children.

Mr. [REDACTED] was also talking about designating other neighbors to help with getting [REDACTED] off of the bus stop and seemed to be making progress towards changing their lives in order to care for the children. They also believed the GAL- [REDACTED] was a big help in this transition.



**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: 08/23/2013 Contact Method: Phone Call  
 Contact Time: 05:30 PM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 09/25/2013  
 Completed date: 09/25/2013 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community, Service Planning, Well Being  
 Contact Type(s): Collateral Contact  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/25/2013 10:04 AM Entered By: [REDACTED]

8/23/13

TC with GAL [REDACTED]

Mrs. [REDACTED] said that since she has been assigned this case, she has discovered that there have been many issues surrounding the death of the child and family members. She stated that the father [REDACTED] has accused the mother killing the child and making threats toward the mother. It was also found that at the funeral for [REDACTED] there were people smoking marijuana in the parking lot and some other family members appeared intoxicated. Mrs. [REDACTED] stated that she spoke to the funeral director to confirm these accusations. The funeral director told Mrs. [REDACTED] that the family could not pay for the funeral and the director paid for all costs pertaining to the funeral. Mrs. [REDACTED] talked about further neglect issues. She told CPSI that she would continue the investigation and would let CPSI [REDACTED] what was found.

Mrs. [REDACTED] says she has concerns for the mother's parenting and believes the [REDACTED] should gain custody of the children.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/20/2013 Contact Method: Face To Face  
 Contact Time: 09:30 AM Contact Duration: Less than 45  
 Entered By: [REDACTED] Recorded For:  
 Location: Court Created Date: 09/23/2013  
 Completed date: 09/23/2013 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community, Service Planning, Well Being  
 Contact Type(s): Court Hearing  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/23/2013 11:41 AM Entered By: [REDACTED]

8/20/13

A Preliminary Hearing was held on this day in front of Judge [REDACTED]. In attendance on this day was DCS Legal [REDACTED], [REDACTED] CPSI, [REDACTED] GAL - [REDACTED] and [REDACTED] (custodians), [REDACTED] (maternal grandmother), [REDACTED] (mother), mother's attorney - [REDACTED].

It was agreed on this day that the children shall remain in the custody of Mr. and Mrs. [REDACTED]. Since the CFTM, the [REDACTED] had changed their mind about wanting to pursue Kinship Foster Care and told the court they would like to do classes to be a foster home for [REDACTED] and [REDACTED]. Judge [REDACTED] approved this and stated a permanency hearing could be held after a custody petition was agreed upon.

The mother, Ms. [REDACTED] spoke to her attorney and agreed to waive the preliminary hearing. The final hearing was put off until after the results of the autopsy and this hearing was set on 12/17/13 at 1:30pm.

Judge [REDACTED] also set the visitations between Ms. [REDACTED] and her children at [REDACTED]. This was agreed upon and CPSI informed the court that a referral was made to Women in Treatment at [REDACTED] for Ms. [REDACTED] substance abuse issues.



**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: 08/15/2013

Contact Method: Phone Call

Contact Time: 10:45 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/15/2013

Completed date: 08/15/2013

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: 08/15/2013 10:13 AM Entered By: [REDACTED]

8/15/13 10:45am

TC with [REDACTED]

CPSI spoke to the custodian, [REDACTED] about the long term care for the children. Mr. [REDACTED] said he wants to know if it is a possibility the mother would lose her parental rights because after speaking to the GAL, [REDACTED] this could happen. CPSI explained some of the juvenile court process and stated the GAL would be able to answer the questions about TPR.

Mr. [REDACTED] was anxious about court and believes [REDACTED] is going to be in for a rude awakening because she still believes she may still get her kids back. CPSI explained that [REDACTED] JC would do everything to ensure the children's safety and would make sure the mother was ready to get back [REDACTED] and [REDACTED]. He stated that if the court were to decide [REDACTED] should never get the children back, they would want to sign up for Kinship Foster Care. He said he did not want that at this time and CPSI told him that the outcome would be unknown at this time.

Mr. [REDACTED] stated that he wants to have scheduled visitation between the mother [REDACTED] and the children. He stated that she has been late to see the children and sometimes pops up unannounced.



**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: 08/09/2013

Contact Method: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/15/2013

Completed date: 08/15/2013

Completed By: [REDACTED]

Purpose(s): Service Planning, Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 08/15/2013 10:19 AM      Entered By: [REDACTED]

8/9/13

TC with [REDACTED]

CPSI had referred [REDACTED] to Women in Hospital at [REDACTED] Hospital. Mrs. [REDACTED] called CPSI to confirm that [REDACTED] had been in contact with her and is going to enroll [REDACTED] next week. She stated there were many spots open at this time due to school starting. Mrs. [REDACTED] stated that the patients enrolling in the program have to be actively using in the last month. CPSI advised that the mother had positive drug screenings within the past few weeks. [REDACTED] will enroll in the counseling on 8/12.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/31/2013

Contact Method:

Contact Time: 02:45 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 09/23/2013

Completed date: 09/23/2013

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/23/2013 11:51 AM      Entered By: [REDACTED]

7/31/13

An Expedited Home Study was completed on this day. This was signed for approval by TL [REDACTED] TC [REDACTED] and Program Coordinator [REDACTED].

The [REDACTED] home was appropriate for [REDACTED] and [REDACTED]. Each child had their own bed and there was also a play room designated for the children. They had bought a bed for [REDACTED] anticipating their stay.

\*\*\*\*\*

A CFTM was held on 7/31/13 and the team decided that Mr. and Mrs. [REDACTED] would file for custody of the children. The 2 options were discussed and at this time, the [REDACTED] decided that it would be best if they file for custody and not do the Kinship Foster Home.

In the CFTM, Ms. [REDACTED] did not want to lose her children but stated that she needs to be sober, needs counseling, and needs her finances in order. She said her top priority was to attend to her mental health needs.

A Hard Copy of the CFTM summary is in the file for reference.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/26/2013	Contact Method:	Correspondence
Contact Time:	10:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	09/23/2013
Completed date:	09/23/2013	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 09/23/2013 11:28 AM      Entered By: [REDACTED]

7/26/13

TC with Ms. [REDACTED] Ms. [REDACTED] called CPSI [REDACTED] to say she completed the Hair Follicle test on this day. She told CPSI that she wanted to cooperate and do what was needed.

CPSI confirmed the Hair Follicle results by requesting them from Mobile Diagnostics. A copy of these results are located in the hard file.

This test was completed on 7/26/13. The results of this test were:

Amphetamines - Negative  
 Cocaine/Metabolites - Negative  
 Opiate - Negative  
 Extended Opiates - Positive  
 ---Hydrocodone - Positive  
 ---Oxycodone - Positive

Phencyclidine - Negative  
 THC Metabolite - Positive



**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: 07/24/2013

Contact Method: Phone Call

Contact Time: 01:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/24/2013

Completed date: 08/15/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/24/2013 02:34 PM Entered By: [REDACTED]

7/24/13

TC with [REDACTED]

Ms. [REDACTED] spoke to CPSI [REDACTED] on this day and stated that she has been sitting at home staring at the wall thinking what she could have done differently to prevent the death of her daughter. She advised that she should be in counseling everyday to deal with this and believes that still may not help. Ms. [REDACTED] said she does not want to hurt herself but is having a hard time with this. CPSI [REDACTED] asked if Ms. [REDACTED] could be able to move apartments and she did not think she could move. She was then referred to [REDACTED] for help with grieving and mental health issues.

CPSI asked Ms. [REDACTED] if she had called to complete the hair follicle test. Ms. [REDACTED] says she wants to do the hair follicle test and cant believe she has to do one to prove that she was not extremely high. She advised that she is willing to do it and knows other mothers that have done worse things and their children are still alive. Ms. [REDACTED] said she was not a bad mother and can not believe this happened to her. She also told CPSI that she does not know how to face her children because she does not know what to tell them about their baby sister. She said that she feels like she does not know how to keep her other children safe because this happened her daughter died while she was watching them.

7/24/13 3:55pm

Ms. [REDACTED] called CPSI back to get the information about the hair follicle test and also counseling. Ms. [REDACTED] said that she was currently getting a tattoo of her baby's name with wings on her arm. She said that she wants to see her baby everyday she wakes up. Ms. [REDACTED] wrote down all the information and stated that she would do the hair follicle by Friday (7/26).



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: System Completed  
 Contact Date: 07/22/2013 Contact Method: Face To Face  
 Contact Time: 03:30 PM Contact Duration: Less than 45  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 09/22/2013  
 Completed date: 09/23/2013 Completed By: System Completed  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/22/2013 02:43 PM Entered By: [REDACTED]

7/22/13 3:30pm

Interview with the mother, [REDACTED] (private), This interview was held at the Family Justice Center and was conducted by CPSI [REDACTED] CPSI requested Ms. [REDACTED] come to the DCS for a more formal interview. She was emotional during the interview and explained that she needs help to get through this traumatic time.

Ms. [REDACTED] reported they had woken up around noon and everything was normal. She advised that she fixed chocolate chip pancakes for the children and allowed a neighborhood child to come over to dance and play. Ms. [REDACTED] said she did not normally watch other children but did on this day. They were playing together and described them watching movies in the living room. Since it was time for [REDACTED] bed time, Ms. [REDACTED] then told [REDACTED] to lay [REDACTED] to sleep with a sippie cup (Tea) in her toddler bed around 1 or 2pm. Ms. [REDACTED] said she had told [REDACTED] to turn the audio down on the movie player because it may wake [REDACTED]. The sound would eventually get louder and Ms. [REDACTED] said she told them a few times.

While [REDACTED] and [REDACTED] were watching movies in the living room, Ms. [REDACTED] stated she was cleaning the kitchen and bathroom. She said she had done some dishes, dusting, and picking up stuff off of the floor. Ms. [REDACTED] said it was a Friday night and was happy about possibly having company over this day. She denied being stressed or having significant problems in her life.

She went back to check on the child a few hours after [REDACTED] had laid down and could not find her daughter. Ms. [REDACTED] stated she began to panic and she said her first thought was that [REDACTED] had climbed out of the window. She ran towards the window and when she turned around, Ms. [REDACTED] found [REDACTED] face down between the twin size bed and wall. This was not the toddler bed and says it was the bigger bed in the room. CPSI then asked how she found [REDACTED] lying and she demonstrated this to CPSI. She showed [REDACTED] laying face down horizontally with her legs in non-flat position. Ms. [REDACTED] said that she could not remember which leg was in front of the other but said they were bent. Ms. [REDACTED] said she always kept the door shut when she slept because [REDACTED] would always run around the home after a nap.

After she found [REDACTED] not moving, she then ran to the neighbors home to call 911 and remembered tasting milk when trying to do CPR on [REDACTED]. She said she knew there was no hope for [REDACTED] after attempting CPR and she was not responding.



## Tennessee Department of Children's Services

### Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

CPSI then asked about illicit drug use and explained that it was found that she had a open case with the Department when this happened. Ms. ██████ seemed to be truthful about the case and explained that she liked CM ██████. She stated that CM ██████ had told her to get an A&D assessment but Ms. ██████ said she had not completed this. Ms. ██████ then told CPSI that she was admitted to the hospital (█████ MC) on 7/19 and 7/20 because of the emotional distress of losing her child. She advised that the hospital gave Xanax to calm her nerves. She advised that she needed help and did not know what to do next. Ms. ██████ was clearly upset and was asking herself questions of why her child had to die. She was then asked about her current drug use. She advised that she smoked marijuana on the morning of 7/19 but said that she was not high to not know what was going on. Ms. ██████ denied being under the influence of any other medications or illegal drugs on 7/19. CPSI asked about the drug paraphernalia and marijuana found on the drawer of the bedside table. She said the spoons that were found were used for Morphine a few days ago. Ms. ██████ says that she used the Morphine a few days before her daughter died on 7/19.

Ms. ██████ stated that she wanted her children to stay at Mr. and Mrs. ██████ home because she is having a hard time with dealing with the death. She said that she wanted to move from her apartment because everything reminds her of ██████. She did not know what to do next and CPSI gave her some steps to get her help. At this time, Ms. ██████ said she did not know when her children would be able to come home. CPSI ██████ told Ms. ██████ that the ██████ would need to receive temporary custody and a more permanent plan would be needed if Ms. ██████ was going to allow the ██████ to continuously care for the children. CPSI explained that a meeting (CFTM) would need to be set to discuss further. She agreed and advised she would attend. Ms. ██████ said that she did not want ██████ and ██████ to live anywhere else because she was once in states custody and did not want the same for her children.

\*\*\*\*\*

#### Drug Screen

Ms. ██████ agreed to 2 urine drug screens on 7/22 and was positive for 1)Benzos, Opiates, and THC and 2)Benzos and THC. TL ██████ supervised these drug screens.

Due to the drug screens having 2 different outcomes, CPSI requested Ms. ██████ to complete a hair follicle exam by next week. Ms. ██████ stated that she would do whatever needed to show she was not a drug abuser.



## 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: Face To Face  
 Contact Time: 08:56 PM Contact Duration: Less than 45  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Caretaker Home Created Date: 09/19/2013  
 Completed date: 09/19/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Well Being  
 Contact Type(s): ACV Interview/Observation,Sibling Interview/Observation  
 Contact Sub Type:

Children ConcerningParticipant(s)Narrative Details

Narrative Type: Original Entry Date/Time: 09/19/2013 06:47 PM Entered By: [REDACTED]

7/19/13 8:56pm

Interview with [REDACTED] This interview was conducted by CPSI [REDACTED] and Inv. [REDACTED] at the home of Mr. and Mrs. [REDACTED]. The [REDACTED] were watching the children for the night due to the incident. This interview was recorded and is on file with [REDACTED] PD.

[REDACTED] stated that she is 7 years old and attends [REDACTED] Elementary. She says she likes living with [REDACTED] and [REDACTED] (her) but also lives at home with her mother. [REDACTED] then told investigators about what happened on this night. She immediately started talking about her sister [REDACTED] going to the hospital because she was not moving. According to [REDACTED] she said that she laid her sister down for a nap and she gave [REDACTED] a sippy cup. [REDACTED] advised that after she laid her sister down for a nap, she watched movies on her mothers phone in the living room. When asked what she did after she watched this movie, she stated that she watched another one with her sister [REDACTED]. CPSI then asked where her mother was when she was watching a movie and she replied that her mother was in her bedroom. [REDACTED] stated that she was on her phone in her bedroom and could have been listening to music also. After some time went by watching movies, [REDACTED] then went to her mothers room to ask why [REDACTED] was still sleeping. [REDACTED] stated this is when Ms. [REDACTED] went to her sisters room and saw [REDACTED] not moving on the floor at the foot of the bed (She was able to identify where the child was lying by a diagram of the room.) Inv. [REDACTED] then questioned [REDACTED] about where she saw her sister and [REDACTED] stated that her mother went in the room first. CPSI asked [REDACTED] if the door was open or shut when she left the room, and [REDACTED] explained that she keeps the door shut because [REDACTED] will run out of the room if the door is left open. [REDACTED] said her mother was panicking and was trying to push on [REDACTED] stomach to wake her up. [REDACTED] said she did not know what to do and said her mother was yelling.

CPSI then asked about any kind of illicit drug use. [REDACTED] explained that she knows that her mother has taken medications for when she is sick but denied ever seeing it used by a spoon or a straw. She said that [REDACTED] father will come over and help give them food. He will also bring them ice cream. She did not know about her mother using any illegal substances. She talked about her mother smoking cigarettes.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Mrs. [REDACTED] then came home from the hospital and [REDACTED] ran up to her grandmother checking on the status of her sister. Mrs. [REDACTED] told [REDACTED] that [REDACTED] had went to heaven and got her wings. This was an emotional time for the family and [REDACTED] sobbed and cried for the rest of the time CPSI was in the home.

9:20pm

Interview with [REDACTED]

[REDACTED] corroborated [REDACTED] story and [REDACTED] did not understand the passing of her sister. [REDACTED] said that she saw her sister in the floor with her eyes closed and thinks she went to the hospital.

[REDACTED] states she likes to watch movies with her sisters and enjoyed living at the [REDACTED] home. She could not explain any other concerns due to her age. [REDACTED] made no disclosures of abuse and was hesitant about knowing what she ate the previous day.



## 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: Face To Face  
 Contact Time: 05:53 PM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Caretaker Home Created Date: 09/22/2013  
 Completed date: 09/22/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency, Safety - Child/Community  
 Contact Type(s): Collateral Contact  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/22/2013 01:27 PM Entered By: [REDACTED]  
 7/19/13 5:53pm

Phone: [REDACTED]

Interview with [REDACTED] (Neighbor of [REDACTED]) - This interview was conducted by Major Crimes Detectives.

Ms. [REDACTED] told investigators that she called 911 after she arrived home at 5:30pm. She had allowed her daughter, [REDACTED] to be babysat by Ms. [REDACTED] on the 7/19 while she went out to run errands. Ms. [REDACTED] said that she last saw [REDACTED] playing in the apartment around 2:00pm. When Ms. [REDACTED] daughter was playing at Ms. [REDACTED] apartment, Ms. [REDACTED] said that she was back and forth between apartments for about 15-30 minutes.

Ms. [REDACTED] reported that Ms. [REDACTED] ran over to her apartment with [REDACTED] in her arms and said that she wasn't breathing. Ms. [REDACTED] then told Ms. [REDACTED] that she found [REDACTED] lying between the bed and wall. Ms. [REDACTED] said when she saw [REDACTED] at this time, the child looked lifeless. Ms. [REDACTED] explained that [REDACTED] was sleep in the toddler bed but was unable to find the child when she went to check on her. Ms. [REDACTED] called 911 and began doing CPR on [REDACTED]. It was said that Ms. [REDACTED] said [REDACTED] was sleeping for about 1 1.5 hours.



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:
Contact Time: 11:30 AM Contact Duration: Less than 15
Entered By: [Redacted] Recorded For:
Location: DCS Office Created Date: 07/22/2013
Completed date: 07/22/2013 Completed By: [Redacted]
Purpose(s): Safety - Child/Community
Contact Type(s): Case Summary
Contact Sub Type:

Children Concerning

Participant(s)

[Redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/22/2013 01:07 PM Entered By: [Redacted]

Family Name: [Redacted]
Family Composition:
Deceased Child: [Redacted] Dob: [Redacted]
Child: [Redacted] DOB: [Redacted] and SS# [Redacted]
Child: [Redacted] DOB: [Redacted] and SS# [Redacted]
Mother: [Redacted] DOB [Redacted] and SS# [Redacted]
No Fathers live with the mother
Father of [Redacted] DOB and SS# [Redacted]
Father of [Redacted] Dob: [Redacted]
Father of [Redacted]

Addresses: [Redacted]
Phone: [Redacted]
Schools: [Redacted] Elementary School

Other involved parties [Redacted]
[Redacted]
Phone [Redacted] and [Redacted]

REFERRAL AND REFERRANT:

7/19/13 [Redacted] Police Department contacted [Redacted] County on call worker around 6:30pm to report a child fatality. The on call worker made the scene at [Redacted] Center around 7pm. The referent spoke with Investigator [Redacted] or and [Redacted] [Redacted] disclosed to the referent that today all the children were up dancing and playing and a neighborhood girl even came to the home to play. [Redacted] reports that around 1pm or 2pm she made a sippie cup for [Redacted] and allowed [Redacted] to put her to bed. [Redacted] stated that [Redacted] placed [Redacted] in the toddle bed located in the bedroom. [Redacted] reported about an hour or two past and she went to check on [Redacted] and did not see her in the room. [Redacted] reports that she became worried and searched the home. [Redacted] reports that she



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

reentered [REDACTED] and [REDACTED] bedroom and found [REDACTED] in between the wall and the large bed in the room. [REDACTED] reported that [REDACTED] was lifeless. [REDACTED] reports that she ran to the neighbors home to call 911 and then administered CPR by instructions of the 911 operator. [REDACTED] reported that the larger bed did have spacing from the wall. [REDACTED] stated that [REDACTED] normal routine when she woke was to run around her room and play. [REDACTED] had a darker mark on her forehead that medical staff stated could have been caused from her laying between the wall and the bed.

Officers found small amounts of Marijuana and drug paraphernalia (spoons) in the night stand beside [REDACTED] bed. The spoons were not reported to be burnt or having residue on them. [REDACTED] has not been drug tested at this time. [REDACTED] had to receive medical treatment at the hospital because she was extremely upset. [REDACTED] has returned home. [REDACTED] and [REDACTED] are presently with family friends, [REDACTED] and [REDACTED]. [REDACTED] and [REDACTED] live at [REDACTED]. [REDACTED] phone contact is [REDACTED]. [REDACTED] agreed that the children go with [REDACTED] and [REDACTED] due to prior arrangements for the children to stay the weekend with [REDACTED] and [REDACTED] prior to this incident.

**CASE ASSIGNMENT:**

7/19/13 This case came to the attention of the Department on 7/19/13 and was assigned to CM [REDACTED] on 7/19/13 as a P3. 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]

**CPIT / CLASSIFICATION (CPIT FOR INVESTIGATION ONLY)**

7/19/13 6:30pm CPIT: Child Protective Investigation Team was convened with [REDACTED] PD [REDACTED]. It was determined that the child, [REDACTED] was being transported to [REDACTED] Hospital due to her not breathing. She child was allegedly found under the bed. Inv. [REDACTED] said he was going to [REDACTED] hospital to see the child and also speak to the mother and any other adults in the home. CPSI will go to [REDACTED] MC to determine the safety of the children. There was very limited information given at this time. No names or siblings were given at this time.

7/19/13 Tennessee Bureau of Investigation Sex Offender Registry search: CM [REDACTED] searched the database and found no results pertaining to [REDACTED]. A copy of such finding is contained within the hard file.

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

Tennessee Felony Offender search: CM [REDACTED] searched the database and found no results pertaining to [REDACTED]. A copy of such finding is contained within the hard file.

7/19/13 Background Check: A request was submitted to General Sessions Court regarding a background check on the family. Inv. [REDACTED] did a local background check on [REDACTED]. There was no warrants and No record on her criminal history.



**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: Face To Face  
 Contact Time: 01:00 AM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: Hospital Created Date: 07/22/2013  
 Completed date: 07/22/2013 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Well Being  
 Contact Type(s): Initial ACV Face To Face  
 Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/22/2013 02:08 PM Entered By: [REDACTED]

7/19/13

Home Visit/Face to Face

Child Protective Services Investigator [REDACTED] (CPSI) made a face to face to initiate the investigation.

Inv. [REDACTED] CPSI [REDACTED] traveled to the hospital and met with Major Crimes Detectives. When CPSI arrived at the hospital, it was found that the child was pronounced dead upon arrival at [REDACTED]. It was determined that investigators would speak to the mother and observe the child.

7/19/13 6:55pm

FF with [REDACTED]

[REDACTED] was deceased lying in the emergency room hospital bed. The nurses were no longer attending to the child but were in the room with her. [REDACTED] was swaddled in a blanket with only her face showing. CPSI noticed on her face that she had a long discolored mark on the side of her forehead about 2 inches long. There were no other concerns and at this time it was believed the child died of asphyxiation.

[REDACTED] PD Forensic Unit took pictures of the child at the home. Clothing of the child was taken from the home.



## Family Functional Assessment

Case Name: \_\_\_\_\_ Case ID: \_\_\_\_\_  
 Primary Case Worker: \_\_\_\_\_ Begin Date: 06/24/2013  
 Last Review By: \_\_\_\_\_ Last Review Date: 02/21/2014

### I. Current Circumstances:

#### A. Reason For Involvement:

06/24/2013 - \_\_\_\_\_ - FFA - Family - \_\_\_\_\_ (7) lives with her sisters \_\_\_\_\_ (4) and \_\_\_\_\_ (18 months) last names unknown along with their mother \_\_\_\_\_. Reporter further stated that \_\_\_\_\_ has been staying with her grandmother (family friend \_\_\_\_\_) as she has had poison ivy and it is believed that she would not receive her medication as she should if she remained with \_\_\_\_\_. Reporter further stated that \_\_\_\_\_ will have all three children over the weekend.

Reporter stated that they have obtained this information from other family members. Reporter stated that \_\_\_\_\_ is using crack cocaine  again  and  shooting up . Reporter further stated that \_\_\_\_\_ is using \_\_\_\_\_ medication. Reporter stated that there are family members that are  involved with drugs as well  and that is how the information was provided.

Reporter stated that \_\_\_\_\_ is no longer being prescribed the Vyvanse. Reporter stated that the discrepancies in the stories between \_\_\_\_\_ and \_\_\_\_\_ about the medication was concerning enough that the physician stopped prescribing it for \_\_\_\_\_.

Reporter stated that she is not taking care of \_\_\_\_\_ and \_\_\_\_\_ and not changing their diapers as she should.

Reporter further stated that it is believed that other family members have witnessed \_\_\_\_\_ bringing in men and believed that prostitution is occurring.

Reporter stated that there are family members that have observed \_\_\_\_\_ with  severe  diaper rash. Reporter further stated that there is a concern about there not being food in the home as well, but reporter has no firsthand knowledge of any of the information.

Reporter stated that on occasions they have observed the children to be  dirty . Reporter stated that during a visit that the children were being fed macaroni and biscuits. Reporter has not been to the home since the end of May.

11/10/2013 - \_\_\_\_\_ - FFA - Family - This is a court removal upon the petition filed by DCS, placing the above half-siblings into DCS  SS  D&N Foster Care as Dependent and Neglected children in that the mother \_\_\_\_\_ has mental health and substance abuse issues and cannot provide appropriate care and supervision at this time. \_\_\_\_\_ ather, \_\_\_\_\_ is currently incarcerated while \_\_\_\_\_'s father, \_\_\_\_\_ is currently incarcerated as well. The children were placed in an approved non-relative home \_\_\_\_\_ and \_\_\_\_\_.

It was reported that \_\_\_\_\_ is not taking any medication(s) with no known medical issues at this time. \_\_\_\_\_ has been diagnosed with ADHD and is taking an unknown medication. She may have changed medication due to recently receiving services and treatment with HR \_\_\_\_\_. This situation needs to be verified as soon as possible.

#### B. Family Story:

### II. Assessment of Family Strengths and Needs/Risks:

**A. Family Significant Strengths:**

**B. Family Significant Needs/Risks/Concerns:**

**III. Person Information:**

**A. Children:**

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] (W/F) PID # [REDACTED]

[REDACTED] (8)

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] (W/F) PID # [REDACTED] Case # [REDACTED]

Unknown SS # 5/11/2009 (4)

**B. Adults:**

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] [REDACTED] Male

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] [REDACTED] Female

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] [REDACTED] Female

[REDACTED] is the birth mother of [REDACTED] and [REDACTED]

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] [REDACTED] Female

11/10/2013 - [REDACTED] - FFA - [REDACTED] - [REDACTED] [REDACTED] Male

**C. Family Together History:**

**D. Other Significant Relationships:**

**E. Legal/Court/DCS History:**

Intake ID	Decision Date / Time	Intake Type	Investigation ID/ Assessment ID
[REDACTED]	06/21/2006 09:57 AM	CPS	[REDACTED]
[REDACTED]		CPS	[REDACTED]

Action Date	Action Category	Action Type	Court Docket #	Action Concerning	Additional Info
10/29/2013	Court Order	Custody Removal (Initial)	[REDACTED]	[REDACTED]	
	Hearing	Adjudicatory		[REDACTED]	
	Hearing	Foster Care Review Board		[REDACTED]	

	Hearing	Judicial Review	[REDACTED]
	Hearing	Other Court Hearing	[REDACTED]
	Hearing	Other Court Hearing	[REDACTED]
	Hearing	Foster Care Review Board	[REDACTED]
04/29/2007	Court Order	Exit Custody D&N/Unruly	[REDACTED]
06/20/2006	Court Order	Custody Removal (Initial)	[REDACTED]
	Hearing	Judicial Review	[REDACTED]
10/29/2013	Court Order	Custody Removal (Initial)	[REDACTED]
	Hearing	Adjudicatory	[REDACTED]
	Hearing	Foster Care Review Board	[REDACTED]

**IV. Assessment of Safety:**

- 01/08/2012 - [REDACTED] - Safety - [REDACTED] -
- 04/22/2012 - [REDACTED] - Safety - [REDACTED] [REDACTED] [REDACTED] [REDACTED] -
- 06/24/2013 - [REDACTED] - Safety - [REDACTED] -
- 08/08/2013 - [REDACTED] - Safety - [REDACTED] - There was a non-accidental death to the child. Autopsy results or still pending.
- 02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] acted as the primary caretaker for her siblings. [REDACTED] was exposed to the death of her sister and claims her mother may have done it by accident. [REDACTED] doesn't understand consequences for her behavior and has not been consistently punished for her behavior due to the lack of control the [REDACTED] had with her. [REDACTED] doesn't open up and talk during therapy sessions.
- 02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] behavior has grown worse since she has been placed with the [REDACTED]. She acts out several times a day. [REDACTED] has hit and kicked the [REDACTED] leaving scratches and scars on their arms and legs.
- 02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] behavior and aggression towards others needs to be monitored. [REDACTED] blames herself for her sisters death. She should be watched for self-harm and/or her aggression towards others.

**V. Assessment of Well Being:**

- 02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] has difficulty expressing her feelings in an appropriate way. She blames herself for her sister's death. [REDACTED] will knock over furniture, kick and hit her caretakers, and yell. The [REDACTED] have reported [REDACTED] laying on the floor screaming "don't let her hurt me" and when asked who was going to hurt her she responded [REDACTED]

02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] emotional and behavioral needs are not being met. [REDACTED] blames herself for her sister's death which leads to difficulties following directions and acting out over small things. [REDACTED] has troubles coping. She works on coping skills with her therapist, but when she is in the moment she is unable to stop and use a coping mechanism. [REDACTED] blames her mother for a lot of her behaviors and is torn between satisfying both her mother and her foster mother. She claims to not want anyone mad at her for what she does or where she would like to live.

02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] has come to a few visitations. She is instructed to bring a healthy supper for [REDACTED] and [REDACTED]. Multiple times she has meant to bring something, but has forgotten. She has brought stuff for ham sandwiches for the girls, but has forgotten the ham. During the visitations [REDACTED] redirects the girls when their behavior has gotten out of hand. [REDACTED] still fails her drug screens when she is tested at visits.

11/10/2013 - [REDACTED] - FFA - [REDACTED] - Dr. [REDACTED] sent the following e-mail after reviewing the WBHI for [REDACTED] on 10/31/13:

After review of the Well Being Information and History Form (CS), the following actions are recommended:

According to the informant, [REDACTED] CPS, [REDACTED] was diagnosed with ADHD by the staff at [REDACTED]. Apparently she was prescribed some medication for this disorder but it is believed that this may have been changed. DCS needs to check with [REDACTED] to determine what medication she is prescribed and whether she has a scheduled appointment to review the effectiveness of this medicine.

Please contact me if you have any questions.

11/10/2013 - [REDACTED] - FFA - [REDACTED] - Dr. [REDACTED] sent e-mail after reviewing the WBHI form for [REDACTED] on 10/31/13:

After review of the Well Being Information and History Form (CS), the following actions are recommended:

No immediate mental health concerns noted on the Well Being Information and History Form.

Should the EPSDT results suggest that further mental health follow-up is needed, please schedule a mental health intake if ongoing services are not already in place.

Please contact me if you have any questions.

## VI. Assessment of Permanence:

02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] knows what it means to have a family and to be part of a family. Some days she wants to go back with [REDACTED] other days she wants to live with the [REDACTED]. She is afraid to disappoint the other because she thinks where DCS puts her is ultimately her decision and her loved ones will be upset with her for her decision. [REDACTED] behavior has inhibited her to continue with cheerleading.

02/20/2014 - [REDACTED] - CANS - [REDACTED] - [REDACTED] has failed to continue her services with [REDACTED] because of her lack of transportation. FSW has given [REDACTED] a bus pass to help with maintaining therapy. [REDACTED] explained that the bus doesn't go near [REDACTED] and it still is a long walk from the nearest bus stop. [REDACTED] has obtained an apartment.

02/21/2014 - [REDACTED] - FFA - Family - A placement stability CFTM was held on 2/6/14. After much discussion and weighing options, the current kinship resource parents determined that [REDACTED] and [REDACTED] should be moved from their home. The CFT determined that [REDACTED] needed level 2 services. DCS Placement is to seek an agency foster home that may be open to the idea of adoption. The current kinship parents wish to continue to have the girls come regularly on weekends for passes.

02/21/2014 - [REDACTED] - FFA - Family - A severe abuse/final hearing was set to be heard in December, but the deceased baby's autopsy results were not yet available at that time. Therefore, court only completed the judicial review. The severe abuse and final hearing will be 4/15/14 at 1:30. This will also serve as the foster care review board, but court has ordered that the children do not need to be present.

03/26/2014 [REDACTED] - FFA - [REDACTED] - 2/24/14 [REDACTED] was placed in a [REDACTED] foster home. The new foster parents are [REDACTED] and [REDACTED] [REDACTED] was excited to have new sisters and a father.

03/26/2014 - [REDACTED] - FFA - [REDACTED] - 2/24/14 [REDACTED] was placed in a [REDACTED] foster home. The new foster parents are [REDACTED] and [REDACTED]

**VII. Assessment of Resources:**

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
[REDACTED]	Behavioral Services/ Intensive In-Home Family Services	Approved	[REDACTED]	07/20/2013	07/31/2013
[REDACTED]	Behavioral Services/ Intensive In-Home Family Services	Approved	[REDACTED]	08/01/2013	08/31/2013
[REDACTED]	Behavioral Services/ Intensive In-Home Family Services	Approved	[REDACTED]	07/01/2013	07/31/2013
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	[REDACTED]	07/23/2013	07/31/2013
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	[REDACTED]	04/21/2014	04/30/2014
[REDACTED]	Behavioral Services/ Non tennicare eligible A&D	Approved	[REDACTED]	12/04/2013	12/31/2013
[REDACTED]	Behavioral Services/ Non tennicare eligible Psychological Services	Approved	[REDACTED]	12/04/2013	12/31/2013
[REDACTED]	Support Services/ Family Support Services	Planned	[REDACTED]	04/09/2014	
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	11/01/2013	11/30/2013
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	11/07/2013	12/29/2013
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	11/07/2013	12/29/2013
[REDACTED]	Support Services/ Family Support Services	Approved	[REDACTED]	11/01/2013	11/30/2013
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	02/03/2014	02/28/2014
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	11/20/2013	11/30/2013
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	01/01/2014	01/31/2014

Name	Service Category / Type	Status	Resource	Status Begin Date	Status End Date
[REDACTED]	Support Services/ Therapeutic/Supervised Visitation	Approved	[REDACTED]	12/01/2013	12/31/2013

\_\_\_\_\_  
*Worker's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Supervisor's Signature*

\_\_\_\_\_  
*Date*



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker: [Redacted]

Date of Referral: 6/20/13 1:21 PM

Date of Assessment: 6/24/13 12:00 AM

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

Number of Children in the Household: 3

Section 1: Immediate Harm Factors

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

Yes No

- 1. Caretaker caused serious physical harm to the child, or made a plausible threat to cause serious physical harm in the current investigation indicated by (check all that apply):
- Serious injury or abuse to child other than accidental.
- 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. [redacted] 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: \_\_\_\_\_



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker [Redacted]

Date of Referral: 7/19/13 11:12 PM

Date of Assessment: 7/22/13 12:00 AM

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

Number of Children in the Household: 3

Section 1: Immediate Harm Factors

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

Yes No

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



Tennessee Department of Children's Services

SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

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

Protective Custody Interventions:

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



Tennessee Department of Children's Services  
SDM™ Safety Assessment

Section 3: Safety Decision

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

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