



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 08/08/2013 11:30 AM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 08/08/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 08/08/2013 03:15 PM
First Team Leader Assigned: [REDACTED] Date/Time 08/08/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 08/08/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 7 Mos	Drug Exposed Infant	No	[REDACTED]	None
[REDACTED]	1 Yr 7 Mos	Drug Exposed Infant	No	[REDACTED]	Birth Mother
[REDACTED]	9 Mos	Neglect Death	Yes	[REDACTED]	Birth Father
[REDACTED]	9 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother

Referent(s)

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

TFACTS:

Family Case ID: [REDACTED]
Open Court Custody: Yes (for sibling, [REDACTED] on 12/23/10)
Closed Court Custody: Yes (for siblings, uncle)
DCS Emergency Custody of [REDACTED] Effective 12/23/2010, Termination Date: 5-22-2012.
DCS Full Guardianship of [REDACTED] Effective 6/8/2011, Termination 1/31/2012.



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

DCS Court Ordered Custody of [REDACTED] [REDACTED] [REDACTED] Effective 3/8/2010, Termination 3/19/2011

Open CPS Yes - # [REDACTED] (DEI) 7/16/13 (CM: [REDACTED] [REDACTED] open, but classified as Indicated)

Indicated # [REDACTED] (LOS) 6/7/11 (perp: [REDACTED] [REDACTED]
[REDACTED] (DEI/DEC) 2/23/11 (perp: [REDACTED] [REDACTED])

Fatality: None

Screen Outs: Yes (5)

History:

2/22/2010-# [REDACTED] MDM-Unable to Complete
8/1/2009-# [REDACTED] DEC-No Services Needed
3/20/2009-# [REDACTED] DEC-AUPU
2/11/2009-# [REDACTED] LOS-No Services Needed
4/7/2008-# [REDACTED] PHA-AUPU
4/2/2006-# [REDACTED] EDN-AUPU
11/7/2005-# [REDACTED] ENN & MDM-AUPU
10/10/2005-# [REDACTED] ENN & LOS-AUPU
5/6/2003-# [REDACTED] PHA & MDM-AUPU
8/9/2002-# [REDACTED] SEE-AUPU
5/14/2002-# [REDACTED] LOS & EDN-AUPU
5/16/2000-# [REDACTED] Minor PHA-AUPU

County: [REDACTED]

Notification: None

School/ Daycare: N/A

Native American Descent: No

Directions: None

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

Reporter states:

This child is not currently in DCS custody.

[REDACTED] (11 months old) and [REDACTED] (1 month old) live with [REDACTED] (Alleged Father of [REDACTED] 31 years old) and [REDACTED] (Mother, 31 years old).

[REDACTED] was born on 7/13/2013 and released from the hospital on 8/3/2013. [REDACTED] had been on Morphine twice during her stay in the NICU due to Opiate dependency. [REDACTED] was abusing Opiates before she found out that she was pregnant. Once she found out that she was pregnant [REDACTED] was prescribed Subutex during her pregnancy. [REDACTED] tested positive for Benzodiazepines and Opiates once while pregnant during her prenatal care visit in March 2013. The referent reported that [REDACTED] had a prescription for Clonazepam as well.

[REDACTED] cord blood test came back positive for Subutex. On 7/18/2013 a random drug screen was completed and [REDACTED] tested positive for Subutex, Opiates and Benzodiazepines. [REDACTED] had a prescription for the Subutex, Clonazepam and Percocet due to her C-Section. [REDACTED] tested positive for Subutex and Clonazepam, which he had a prescription for.

On 7/24/2013 a pill count was completed and verification of the count is being processed through medical records. A safety plan was completed on 7/30/2013 with all adults living in the household to release [REDACTED] from the hospital.



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A follow up visit was completed today and the referent found out that [REDACTED] had passed away yesterday (8/7/2013) morning. [REDACTED] was found lying on her back in her crib. Law enforcement was notified and they are thinking that it was SIDS. Foul play is not suspected at this time. [REDACTED] death is still being investigated at this time. Autopsy results are pending at this time.

There are some concerns involving [REDACTED] and an IPA is currently being completed. The adults in the home are going to be drug screened and their levels checked. There are adults in the home with prescription medication and the levels will determine if there has been any deviation from the prescriptions or additional substances being taken. The IPAs outcome is going to depend on the screening results.

[REDACTED] is currently in the care of [REDACTED] [REDACTED] (Paternal Great Grandmother). [REDACTED] (17-uncle) has not been removed from the home. It is unknown if [REDACTED] will be included on the IPA at this time. The referent did not make contact with [REDACTED] today, because he was not home at the time of the visit.

****NOTE: Contact with the family was made at 12:30 p.m. est****

Special Needs:

[REDACTED] was diagnosed with NAS

Per SDM: Investigative Track, P1 - Child Death

[REDACTED] [REDACTED] TC, on 8/8/13 @ 3:06pm

Notified Child Death/Child Near Death Notification Group via Email:

[REDACTED]



**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:** 63 Yrs
Address: [REDACTED]
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: No
DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]
Gender: Male **Date of Birth:** [REDACTED] **Participant ID:** [REDACTED]
SSN: **Race:** White **Age:** 1 Yr 7 Mos (Est)
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: 31 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 17 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**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: 9 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:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 20 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 31 Yrs (Est)

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

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
Tennessee Child Abuse Hotline Summary**

Name: [REDACTED]

Gender: Male

Date of Birth:

Participant ID: [REDACTED]

SSN:

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: 08/08/2013

Assignment Date: 08/08/2013

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 4 rows of allegations.

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: According to CPS categories and definitions of DEI and Neglect Death there is insufficient evidence to substantiate either allegation at this time.

D. Case Workers

Case Worker: [Redacted]

Date: 03/25/2014

Team Leader: [Redacted]

Date: 03/25/2014

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:



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

Case Name : ██████████ ██████████

Investigation ID: ██████████

██████████ ██████████ was found by her parents to be lying on her back on 08/07/2013 in her basinette not breathing. ██████████ had blood coming from her nose. EMS responded to the family home. Law enforcement had no concerns for foul play.

██████████ SO Det ██████████ ██████████ was assigned to the case and did not notify CPS.

CPSI ██████████ traveled to the family home on 08/08/2013 for an unannounced visit for a previous open investigation from the birth of the infant. The infant was born addicted to Subutex and remained in the NICU at ██████████ MC for several weeks prior to discharge. The infant was home for 5 days prior to her death.

CPS observed the 11 month child on 08/08/2013 and the Department completed an Immediate Protection Agreement with the family placing the child with a family member until the parents could be drug screened via hair follicle screening.

██████████ ██████████ has always been observed to be clean, happy and healthy.

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

Final autopsy report indicates that there is no evidence of abuse or neglect. The report noted that the infant was very clean and appeared to be well cared for. There were no traces of drugs or alcohol in the infant's system. The report did note that the child was diagnosed with NAS. Cause of death was determined to be SUIDS.

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

The mother and father, ██████████ ██████████ and ██████████ ██████████ were hysterical concerning the death of their infant. ██████████ ██████████ and ██████████ were very compliant with CPS and their requests. Both complete hair follicle screens and agreed to place their child with a relative until further investigation could be completed. Both denied drug use outside of taking what they are prescribed as prescribed. Pill counts were completed and accurate.

The mother and father are both prescribed Subutex/Suboxone and Klonopine from ██████████ Clinic in ██████████ ██████████

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

Please see initial CPS intake report for details.

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

Autopsy results were received with no information to support abuse or neglect. Please see full report in CPS file. All investigation tasks are complete. There are no current safety concerns. The mother, ██████████ ██████████ has reported that she is 9 weeks pregnant and is still being prescribed Subutex. She is taking 3 a day. The mother was advised by CPS to consult with her OB/GYN (Dr. ██████████) and her Subutex provider (Dr. ██████████ @ ██████████ Clinic, ██████████) about her experience with Subutex during and after pregnancy concerning ██████████

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 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: 03/25/2014

Contact Method:

Contact Time: 10:38 PM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 03/25/2014

Completed date: 03/25/2014

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: 03/25/2014 09:47 PM Entered By: [REDACTED]

Lead Investigator [REDACTED] approved the case closure. LI [REDACTED] did not assume supervision of this case until 1/27/14. However LI [REDACTED] was out on medical leave from 2/10/14 to 3/17/14. Prior to the 1/17/14 date and during LI [REDACTED] medical leave supervision was provided by LI [REDACTED]. The case is being classified as AUPU due to the child death being ruled SIDS.

The date the referral was received was 8/8/13

The daily notification of the referral to juvenile court was submitted on 8/8/13. CPIT was also convened on 8/8/13.

An IPA was initiated on 8/8/13 approved by RGC [REDACTED] TC [REDACTED] and TL [REDACTED]. The IPA was dissolved on 9/10/13 by same.

CFNR was submitted to the child fatality notification group on 8/9/13

AR's were completed on 8/8/13, 9/10/13, 10/30/13 1/30/14

Referent Notification Letter was not sent as documented on 8/8/13.

Case was presented to CPIT on 1/30/14

740 has been completed and will be submitted to juvenile court.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/25/2014

Contact Method:

Contact Time: 01:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/25/2014

Completed date: 03/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/25/2014 12:36 PM Entered By: [REDACTED]

Closing Case Summary:

According to CPS categories and definitions of DEI and Neglect Death there is insufficient evidence to substantiate either allegation at this time. This investigation is overdue as the outcome has been pending autopsy results from [REDACTED]. Autopsy results were received with no information to support abuse or neglect. Please see full report in CPS file. All investigation tasks are complete. There are no current safety concerns. The mother, [REDACTED] [REDACTED] has reported that she is 9 weeks pregnant and is still being prescribed Subutex. She is taking 3 a day. The mother was advised by CPS to consult with her OB/GYN (Dr. [REDACTED] and her Subutex provider (Dr. [REDACTED] @ [REDACTED] Clinic, [REDACTED] about her experience with Subutex during and after pregnancy concerning [REDACTED]. Case is being closed and classified 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: 03/25/2014

Contact Method: Phone Call

Contact Time: 12:42 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/25/2014

Completed date: 03/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/25/2014 12:19 PM Entered By: [REDACTED]

CPSI [REDACTED] made telephone contact with [REDACTED] on 03/25/2014. [REDACTED] stated that the family is doing well. [REDACTED] said that [REDACTED] is doing great and talking a lot. CPS could hear [REDACTED] in the background talking and laughing. [REDACTED] told CPS that she just found out that she is pregnant again. [REDACTED] said that she is 9 weeks pregnant. [REDACTED] said that she is still taking Subutex and is taking 3 a day. [REDACTED] said that everyone in her parenting classes talks about DCS getting involved when a baby is born on Subutex. [REDACTED] said that she has told everyone in her class that DCS will be involved and that they just need to do what DCS tells them to do. [REDACTED] said that she knows that Subutex causes withdraws and she does not think that there is enough research to support giving Subutex to pregnant women.

[REDACTED] said that she gets her Subutex from Dr. [REDACTED] in [REDACTED] at [REDACTED] Clinic. [REDACTED] reported that she is seeing Dr. [REDACTED] for her prenatal care.

CPSI [REDACTED] advised [REDACTED] to talk to Dr. [REDACTED] and Dr. [REDACTED] about the prescriptions she is on and was encouraged to express her concern for the withdraws to both doctors.

CPS discussed case closure with [REDACTED] who stated that she wanted the case 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:	02/08/2014	Contact Method:	
Contact Time:	04:30 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	03/25/2014
Completed date:	03/25/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 12:20 PM Entered By: [REDACTED]

[REDACTED] was in a car accident in [REDACTED] on 02/08/2014. [REDACTED] was injured in the accident but is stable.



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:	01/30/2014	Contact Method:	
Contact Time:	01:45 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	02/02/2014
Completed date:	02/02/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/02/2014 05:04 PM Entered By: [REDACTED]

CPSI presented the case to the members of CPIT on this date. The case will be classified as Unsubstantiated.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/28/2014

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 03/25/2014

Completed date: 03/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/25/2014 11:34 AM Entered By: [REDACTED]

CPSI [REDACTED] obtained a copy of the final autopsy report for [REDACTED] [REDACTED] on 01/28/2014 from Det. [REDACTED]. Autopsy report notes that there were no drugs or alcohol found in the infant's system, there were no internal or external injuries to the infant, and there were no signs of abuse or neglect. The autopsy report notes that the infant was very clean and appeared to be very well cared for. Further the autopsy report states that the NAS could be a contributing factor to the death and that the cause of death is SUIDS. Please see CPS file for full final autopsy report.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 12/11/2013 Contact Method: Face To Face
Contact Time: 11:00 AM Contact Duration: Less than 15
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/25/2014
Completed date: 03/25/2014 Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): ACV Interview/Observation,Other Persons Living in Home
Interview/Observation,Parent/Caretaker Interview
Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 12:23 PM Entered By: [REDACTED]

CPS made a home visit to the family's new residence at [REDACTED] No safety concerns were noted. Face to face was made with [REDACTED] with no concerns.



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: 10/30/2013

Contact Method:

Contact Time: 10:31 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/30/2013

Completed date: 10/30/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/30/2013 09:36 AM Entered By: [REDACTED]

TL [REDACTED] and CPSI [REDACTED] reviewed the circumstances of this case. CPS originally completed an IPA for the parents to have no unsupervised contact with the sibling until the results of the drug screen with levels was received. The results of the drug screen indicated that the parents were not under the influence of any kind of medication or narcotics that were not prescribed. The IPA was terminated when the results were received and family members were notified. CPS is maintaining contact with law enforcement to receive a copy of the final autopsy report when finalized. This case will remain open until the results are received.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 10/28/2013 Contact Method: Attempted Face To Face
 Contact Time: 10:00 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 03/25/2014
 Completed date: 03/25/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): ACV Interview/Observation
 Contact Sub Type:

Children Concerning

[REDACTED] [REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 11:41 AM Entered By: [REDACTED]

CPSI [REDACTED] attempted to make F2F contact with [REDACTED] [REDACTED] on 10/28/2013 at the family home, [REDACTED]
 There was no one present at the home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/10/2013	Contact Method:	Phone Call
Contact Time:	03:30 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	03/25/2014
Completed date:	03/25/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Other Persons Living in Home Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 11:39 AM Entered By: [REDACTED]
IPA was dissolved on this date. Family members and caretakers were notified.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/10/2013

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/25/2014

Completed date: 03/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/25/2014 11:38 AM Entered By: [REDACTED]

CPSI [REDACTED] received the hair follicle results from [REDACTED] Paramedical on 09/10/2013. Levels of prescription medications were in normal limits and no other substance were observed in screen. Drug screen is considered to be negative due to the prescriptions.



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:	08/27/2013	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	03/25/2014
Completed date:	03/25/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 10:38 AM Entered By: [REDACTED]

[REDACTED] and [REDACTED] completed their hair follicle screens on this date.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/26/2013

Contact Method: Attempted Phone Call

Contact Time: 09:16 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/26/2013

Completed date: 08/26/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/26/2013 08:18 AM Entered By: [REDACTED]

CPSI [REDACTED] attempted to contact [REDACTED] [REDACTED] via telephone at [REDACTED] on 08/26/2013. CPSI [REDACTED] left a voice message for Ms. [REDACTED] requesting a returned phone call.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/12/2013	Contact Method:	Correspondence
Contact Time:	10:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	03/25/2014
Completed date:	03/25/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact,Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 10:36 AM Entered By: [REDACTED]

CPSI [REDACTED] received notification from TEIS that a case has been opened for [REDACTED] and [REDACTED] on 08/12/2013.
CPSI [REDACTED] made contact with TEIS and informed of the infant's death. TEIS will remain in the home for [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/09/2013	Contact Method:	
Contact Time:	12:16 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/09/2013
Completed date:	08/09/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/09/2013 11:16 AM Entered By: [REDACTED]

Date of death (8-7-13) has been entered into TFACTS for said infant, [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: 08/08/2013

Contact Method: Phone Call

Contact Time: 05:25 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/08/2013

Completed date: 08/08/2013

Completed By: [REDACTED]

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

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

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/08/2013 05:13 PM Entered By: [REDACTED]

CPSI CM3 [REDACTED] made PC to CPIT-[REDACTED] (Executive Director of CAC) to advise of this child fatality and the circumstances surrounding this referral. [REDACTED] also advised that she had spoken to CPS TL [REDACTED] via phone earlier today regarding this referral. CPSI SMB advised [REDACTED] that the intake summary will be sent via email in the morning (8-9-13).

*NOTE: CPSI [REDACTED] also spoke and discussed this referral with [REDACTED] SD Detective [REDACTED] (who is assigned this case) earlier today (8-8-13).

CPIT CONVENED



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: 08/08/2013

Contact Method: Correspondence

Contact Time: 05:06 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/08/2013

Completed date: 08/08/2013

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: 08/08/2013 05:08 PM Entered By: [REDACTED]

CPSI CM3 [REDACTED] emailed Notice of Child Fatality/Near Fatality (CS-0635) on said child [REDACTED] to the following individuals:

Child-Fatality-Notification EI-DCS

[REDACTED]

*cc'd email to [REDACTED] & [REDACTED]

COPY OF FORM CS-0635 LOCATED IN CPS CASE FILE.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/08/2013

Contact Method: Correspondence

Contact Time: 04:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location:

Created Date: 08/08/2013

Completed date: 08/08/2013

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/08/2013 03:30 PM Entered By: [REDACTED] [REDACTED]

CPS did not mail the Confidential Notification Letter to Reporter. See intake summary/680 for more details.



**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:	08/08/2013	Contact Method:	
Contact Time:	03:30 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/08/2013
Completed date:	08/08/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/08/2013 05:29 PM Entered By: [REDACTED]

CPSI CM3 [REDACTED] completed the following checks on the following two individuals:

[REDACTED] (also has gone by the prior last names of [REDACTED])

DOB: [REDACTED]
SS#: [REDACTED]

DOB: [REDACTED]
SS#: [REDACTED]

SSMS and TFACTS History checks indicate no prior history found on either individual (searches by DOB's; SS#'s; full names, and address search)

TN Abuse Registry checks indicate no prior history on either individual.

National Sex Offender Registry checks indicate no prior history on either individual.

CPSI [REDACTED] also completed local background checks on both individuals ([REDACTED] Sheriff's Department).

CPSI CM3 SMB relayed the above information to CPS TL [REDACTED] & CPSI [REDACTED] via email on this date.

COPIES OF INTERNET REGISTRY CHECKS LOCATED IN CPS CASE FILE.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/08/2013 Contact Method:
 Contact Time: 03:00 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 03/25/2014
 Completed date: 03/25/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/25/2014 01:02 PM Entered By: [REDACTED]

Family Case ID: [REDACTED]

Open Court Custody: Yes (for sibling, [REDACTED] on 12/23/10)

Closed Court Custody: Yes (for siblings, uncle)

DCS Emergency Custody of [REDACTED] Effective 12/23/2010, Termination Date: 5-22-2012.

DCS Full Guardianship of [REDACTED] Effective 6/8/2011, Termination 1/31/2012.

DCS Court Ordered Custody of [REDACTED] Effective 3/8/2010, Termination 3/19/2011

Open CPS Yes - # [REDACTED] (DEI) 7/16/13 (CM: [REDACTED] open, but classified as Indicated)

Indicated # [REDACTED] (LOS) 6/7/11 (perp: [REDACTED])
 # [REDACTED] (DEI/DEC) 2/23/11 (perp: [REDACTED])

Fatality: None

Screen Outs: Yes (5)

History:

2/22/2010-# [REDACTED] MDM-Unable to Complete
 8/1/2009-# [REDACTED] DEC-No Services Needed
 3/20/2009-# [REDACTED] DEC-AUPU
 2/11/2009-# [REDACTED] LOS-No Services Needed
 4/7/2008-# [REDACTED] PHA-AUPU
 4/2/2006-# [REDACTED] EDN-AUPU
 11/7/2005-# [REDACTED] ENN & MDM-AUPU
 10/10/2005-# [REDACTED] ENN & LOS-AUPU
 5/6/2003-# [REDACTED] PHA & MDM-AUPU
 8/9/2002-# [REDACTED] SEE-AUPU



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

5/14/2002-# [REDACTED] LOS & EDN-AUPU
5/16/2000-# [REDACTED] Minor PHA-AUPU



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [redacted] Case Name: [redacted]
Case Status: Close Organization: [redacted]

Case Recording Details

Recording ID: [redacted] Status: Completed
Contact Date: 08/08/2013 Contact Method: Face To Face
Contact Time: 12:30 PM Contact Duration: Less than 03 Hour
Entered By: [redacted] Recorded For:
Location: Family Home Created Date: 03/25/2014
Completed date: 03/25/2014 Completed By: [redacted]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Alleged Perpetrator Interview,Collateral Contact,Initial ACV Face To Face,Other Persons Living in Home Interview/Observation,Parent/Caretaker Interview
Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2014 09:36 AM Entered By: [redacted]

CPSI [redacted] traveled to [redacted] on 08/08/2014 for an unannounced visit with the family in compliance with required tasks for investigation id# [redacted]. CPSI [redacted] knocked on the front door of the home and heard movement inside the home. The paternal grandmother, [redacted] answered the front door. Ms. [redacted] told CPSI [redacted] to get in the home. Ms. [redacted] had tears in her eyes. CPSI [redacted] asked what was going on and [redacted] stated that [redacted] died. [redacted] and [redacted] came in to the living room of the home. [redacted] and [redacted] were crying hysterically. The family explained that the infant was found non-responsive in her basinette yesterday morning (08/07/2013) at approximately 6am. [redacted] stated that she put [redacted] to bed on 08/06/2014 at 11pm and they woke up this morning and she was not breathing. [redacted] said that [redacted] did not wake them up through the night after going to sleep at 11pm. [redacted] said that she would have woke up if [redacted] had cried. [redacted] kept asking CPSI [redacted] what happened to [redacted]. CPSI [redacted] observed the room where [redacted] was sleeping. [redacted] shared a bedroom with her parents but slept in a basinette. No safety concerns were noted during this visit although the death occurred the day before this visit. [redacted] was found lying on her back in the basinette and the parents described blood coming from her nose.

CPS was not notified of the death

CPSI [redacted] exited the home and contacted the [redacted] Sheriff's Department. Detective [redacted] was assigned to the case and responded to the home on the date of death at the time the infant was found to be unresponsive. CPSI [redacted] spoke with [redacted] via telephone. [redacted] stated that there were no abuse or neglect concerns at this time but that autopsy results are pending. CPSI [redacted] explained CPS involvement to Det. [redacted] as he is a CPIT member. [redacted] stated that he did not know that CPS was involved as the family said nothing about it. Det. [redacted] stated that EMS and [redacted] SO have taken multiple photos and these would be given to CPSI [redacted]. [redacted] further stated that he would give CPSI [redacted] a copy of the report made. [redacted] reported that the father attempted CPR on the infant after calling 911. CPSI [redacted] spoke with CPS TL [redacted] via telephone to inform her of the death. [redacted] contacted TC [redacted]. CPSI [redacted] discussed the current safety of [redacted] (11mos) who is still at the family home. CPSI [redacted] observed [redacted] on this date. [redacted] was smiling and playing as he has during every visit that CPSI [redacted] has made to the family home. CPSI [redacted] observed [redacted] moving freely. He was dressed appropriately and



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

appeared to be clean and healthy. No marks or bruises were observed on [REDACTED] on this date. CPSI [REDACTED] expressed concern for the parents being over medicated and expressed the possible concern for the child's safety not knowing what the levels of prescription medications in the parents systems. CPSI [REDACTED] obtained approval to complete an IPA with family members until [REDACTED] and [REDACTED] complete hair follicle drug screens. TL [REDACTED] and TC [REDACTED] approved this IPA. [REDACTED] provided legal approval. The parents gave CPSI [REDACTED] the name of an aunt, [REDACTED] as a resource placement for [REDACTED]. CPSI [REDACTED] traveled to the home of Ms. [REDACTED] and completed a home study. Ms. [REDACTED] and her boyfriend, [REDACTED] are the only residents at the home. Complete criminal history checks were done, including internet record checks. All checks were clear. [REDACTED] and [REDACTED] signed the IPA. Please see CPS file for the original IPA. [REDACTED] and [REDACTED] came to the DCS office on this date and stated that they were going to make funeral arrangements for [REDACTED] and [REDACTED] expressed concern because they do not have money to pay for the funeral. CPSI [REDACTED] discussed some possible solutions with the family who appeared to be somewhat relieved and told [REDACTED] that they would let her know what they found out. [REDACTED] showed CPSI [REDACTED] the outfit she was going to have put on [REDACTED] for her burial.



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: 08/08/2013 Contact Method:
 Contact Time: 11:46 AM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 08/09/2013
 Completed date: 08/09/2013 Completed By: [REDACTED]
 Purpose(s): Service Planning
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/09/2013 02:28 PM Entered By: [REDACTED]

Please note--the following information is a summary of contacts completed on this date:

TL [REDACTED] received a phone call from CPSI [REDACTED] on this date regarding the infant's death. CPSI [REDACTED] reported that she went to the family's home for a home visit and to follow up on the plan and was notified that the infant passed away yesterday (08/07/2013) morning. CPSI [REDACTED] immediately contacted the [REDACTED] Sheriff's Department and spoke with assigned Detective, [REDACTED] Det. [REDACTED] stated that no foul play or child abuse/neglect is suspected at this point. It was reported that SIDS is suspected. It was stated that the infant was found in her crib on her back and no unsafe sleep arrangements were noted. CPSI [REDACTED] reported that the information had not been called in to the Hotline. TL [REDACTED] let CPSI [REDACTED] know that TL [REDACTED] would notify RA [REDACTED] immediately and for CPSI [REDACTED] to call the referral in as soon as she had the information needed to make the call.

TL [REDACTED] contacted RA [REDACTED] and updated her with the information noted above and on case history. It was decided that CPS would complete an IPA (Immediate Protection Agreement) for the parents to have no unsupervised contact with the sibling until the results are received from drug screens that contain levels as a safety measure.

TL [REDACTED] contacted TC [REDACTED] and discussed the above information. TC [REDACTED] also approved the IPA.

TL [REDACTED] relayed the above information to CPSI [REDACTED] CPSI [REDACTED] also reviewed the above information with Regional Supervising Attorney, [REDACTED]

TL [REDACTED] contacted CPIT/CAC Director, [REDACTED] and convened CPIT. TL [REDACTED] discussed the circumstances of the case with Director [REDACTED]

TL [REDACTED] contacted CPS CM3 [REDACTED] and reviewed the current situation, as TL [REDACTED] was out of the office. CPS [REDACTED] stated that she would assist CPSI [REDACTED] with anything needed and would send the paper notifications to convene CPIT.

CPS CM3 [REDACTED] and CPSI [REDACTED] completed the Child Fatality Notification Form and emailed it to the Child Fatality Notification Group.



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: 08/08/2013

Contact Method:

Contact Time: 03:15 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/25/2014

Completed date: 03/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/25/2014 09:31 AM Entered By: [REDACTED]

CPS Investigation id# [REDACTED] was assigned to CPSI [REDACTED] on 08/08/2014 and assigned a P1 priority response code. ACVs are [REDACTED] (11 mos) and [REDACTED] (25 days). Allegations are DEI [REDACTED] and Neglect Death [REDACTED] APs are [REDACTED] (no relation to [REDACTED] father to [REDACTED] and [REDACTED] (birth mother). CPS intake report reads as follows:

Reporter states:

This child is not currently in DCS custody.

[REDACTED] (11 months old) and [REDACTED] (1 month old) live with [REDACTED] (Alleged Father of [REDACTED] 31 years old) and [REDACTED] (Mother, 31 years old).

[REDACTED] was born on 7/13/2013 and released from the hospital on 8/3/2013. [REDACTED] had been on Morphine twice during her stay in the NICU due to Opiate dependency. [REDACTED] was abusing Opiates before she found out that she was pregnant. Once she found out that she was pregnant [REDACTED] was prescribed Subutex during her pregnancy. [REDACTED] tested positive for Benzodiazepines and Opiates once while pregnant during her prenatal care visit in March 2013. The referent reported that [REDACTED] had a prescription for Clonazepam as well.

[REDACTED] cord blood test came back positive for Subutex. On 7/18/2013 a random drug screen was completed and [REDACTED] tested positive for Subutex, Opiates and Benzodiazepines. [REDACTED] had a prescription for the Subutex, Clonazepam and Percocet due to her C-Section. [REDACTED] tested positive for Subutex and Clonazepam, which he had a prescription for.

On 7/24/2013 a pill count was completed and verification of the count is being processed through medical records. A safety plan was completed on 7/30/2013 with all adults living in the household to release [REDACTED] from the hospital.

A follow up visit was completed today and the referent found out that [REDACTED] had passed away yesterday (8/7/2013) morning. [REDACTED] was found lying on her back in her crib. Law enforcement was notified and they are thinking that it was SIDS. Foul play is not suspected at this time. [REDACTED] death is still being investigated at this time. Autopsy results are pending at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

There are some concerns involving [REDACTED] and an IPA is currently being completed. The adults in the home are going to be drug screened and their levels checked. There are adults in the home with prescription medication and the levels will determine if there has been any deviation from the prescriptions or additional substances being taken. The IPAs outcome is going to depend on the screening results.

[REDACTED] is currently in the care of [REDACTED] [REDACTED] (Paternal Great Grandmother). [REDACTED] (17-uncle) has not been removed from the home. It is unknown if [REDACTED] will be included on the IPA at this time. The referent did not make contact with [REDACTED] today, because he was not home at the time of the visit.

****NOTE: Contact with the family was made at 12:30 p.m. est****

Special Needs:

[REDACTED] was diagnosed with NAS

Per SDM: Investigative Track, P1 - Child Death

[REDACTED] [REDACTED] TC, on 8/8/13 @ 3:06pm

Initial Notification of Report was made to Juvenile Court on this 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: 7/16/13 10:27 AM Date of Assessment: 7/16/13 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
[X] [] 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.
[X] Drug-affected infant/child.
[] Methamphetamine lab exposure.
[] [X] 2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
[] [X] 3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
[] [X] 4. Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.
[] [X] 5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
[] [X] 6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
[] [X] 7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
[] [X] 8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
[] [X] 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: _____