



Tennessee Department of Children's Services
Notice of Child Death/Near Death

Case # 2013.111ph

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	08/22/2013	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	10/15/2013		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	White (Non Hispanic)	County/Region:	██████████
Parents' Names:	Mother:	██████████	Father:	██████████		
Alleged Perpetrator's Name:	██████████	Relationship to Victim:	Biological mother			
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:	N/A		
If child is in DCS custody, list placement type and name:	N/A					

Describe (in detail) circumstances surrounding death/near death:

A P2 referral was received on 08/22/2013 with allegations of DEI/EN/LOS. The alleged perpetrator was listed as the biological mother, ██████████. The referral states as followed: "██████████ (8 days old) will be living with her mother, ██████████. The child's father, ██████████ is not in the home. There are several concerns. The mother has a mental health diagnoses that she is not being treated or receiving medication management; initially diagnosed with bipolar disorder and then later diagnosed with depression. The mother has diabetes that is not managed properly. The family has a large history of diabetes and diabetes-related illness. The mother had a positive urine screen for benzodiazepines. It is unknown if they were prescribed to the mother or not. The mother stated that it (benzodiazepines) was prescribed to her. The newborn nurse went to the home (unknown date) and stated that home was unsanitary with garbage on the front porch and cigarette butts, and the home was very small for the number of people living in the home. The parents do not have a car, so there is a concern about getting the child to doctor's appointments and the parents getting resources for the child. The parents both have court issues. The child's urine screen was negative and meconium may be (unknown at report time) pending. The child is not showing any signs of withdrawal at this time. The child is currently in NICU. The mother is still hospitalized for her diabetes."

Response time was met on 08/23/2013 by CPSI, ██████████ at 1:00 P.M. Child was born prematurely (30 weeks) with Vacterl Syndrome, and weighed 3 lbs at birth. This syndrome is a non-random association of birth defects. The referent reported the child was missing brain tissue upon birth, as well as missing one kidney and his rectum was blocked. The referent also indicated this was not a result of abuse and/or neglect, as the child has never been released from the hospital. The referent also informed the CPSI that she should not have stated it was unknown if the biological mother had a prescription for Benzodiazepines, as they had confirmed she did have this prescription. The child's meconium was not positive for any illegal or prescription drug.

The child and the alleged perpetrator, biological mother, were seen by the FSW on 08/23/2013, 09/06/2013 and 09/16/2013 at ██████████ Children's Hospital in the NICU unit. Nurse, ██████████ stated that the biological mother has a good support system, as they are always at the hospital with her, assisting her with the baby.

CPSI and biological mother met with the doctor on 09/16/2013, at which time the biological mother was given the news that the prognosis was so poor, that no more attempts would be made to improve his medical condition, as the child was missing too much brain tissue.

A home visit was conducted on 09/26/2013, in order to investigate the home environment. CPSI met with the grandmother, ██████████. The home was a three-bedroom home; however, it was reported that many people reside in this home. The home was found to be clean and free of safety hazards.

On 10/31/2013, CPSI, ██████████ contacted the family in order to schedule a hospital visit with the child. The biological mother reported that the child passed away on 10/15/2013 due to complications from Vacterl Syndrome. ██████████ Children's Hospital did not inform DCS of the child's death.

If this is a near death certified by a physician, identify physician by name and provide contact information:

Name of Physician:	N/A	Telephone #	() -
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Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child's Case File

CS-0635, Rev. 08/13

RDA 2993

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Intake #:	██████████	Investigation #:	██████████	Date of Report:	08/23/2013	Case #	2013-111ph
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Street Address:	████████████████████████████████████████	City/State/Zip:	██████████
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Describe (in detail) interview with family:

Child was visited by the CPSI on 08/23/2013, 09/06/2016 and 09/16/2013. The child was seen in the NICU at ██████████ Children's Hospital. He was diagnosed with Vacterl Syndrome, and he was observed to have complications from this syndrome.

Child is was interviewable due to his age. The biological mother was interviewed at the hospital and on visits as cited above. The child's condition was discussed with her during all visitations which occurred on 08/23/2013, 09/06/2013 and 09/16/2013.

If child was hospitalized, describe (in detail) DCS involvement during hospitalization:

The child was hospitalized from the time of birth, ██████████ until time of death, 10/15/2013. Visits were made to see the child by the CPSI on 08/23/2013, 09/06/2013 and 09/16/2013. The child was not in the hospital due to abuse or neglect, but was hospitalized due to premature birth, diagnosis of Vacterl Syndrome, and complications from both.

Describe disposition of body (Death):	Unknown
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Name of Medical Examiner/Coroner:	Unknown	Was autopsy requested?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
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Did CPS open an investigation on this Death/Near Death?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
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Was there DCS involvement at the time of Death/Near Death?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
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Type:	Investigation	Case #:	██████████
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Describe law enforcement or court involvement, if applicable:

There was no law enforcement or court involvement in this case

Describe (in detail) action taken to ensure safety of other children (list names and ages of surviving children) and/or victim (Near Death) (attach safety plan, if applicable):

There are no other children in this family, and there is no previous CPS history with this family.

Name: N/A	Age:

Prior DCS involvement with the family. Include dates, type, case #s, allegations, victims, perpetrators (if applicable), and classifications/adjudications (if applicable):

Date	Case #	Allegations	Victims	Perpetrators	Classification/Adj
/ /		N/A			
/ /		N/A			
/ /		N/A			
/ /		N/A			
/ /		N/A			
/ /		N/A			
/ /		N/A			

Any media inquiry or is attention expected?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	List organizations requesting information:
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Contact Person/Phone Number(s) (include CM, TL, and TC):

Contact Person:	Telephone Number: () -
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Case Manager: ██████████	Telephone Number: ██████████
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Intake #:	██████████	Investigation #:	██████████	Date of Report:	08/22/13	Case #	2013-111ph
Team Leader:	██████████	██████████	Telephone Number:	██████████			
Team Coordinator:	██████████	██████████	Telephone Number:	██████████			
ATTACH a copy of the <u>TFACTS Incident Report</u> or if TFACTS is inoperable, <u>DCS Form CS-0496, Serious Incident Report</u> to this notice.						<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>Email to: Child-Fatality-Notification EI-DCS within forty-eight (48) hours of notification Include subject line (in RED): CHILD DEATH [secure email] or CHILD NEAR DEATH [secure email]</p>							



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

Intake

Intake ID: [REDACTED]

Intake Taken By: [REDACTED]

Intake Date/Time: 10/31/2013 04:59 PM CT

Track Assigned: Investigation

Priority Assigned: 2

Screened By: [REDACTED]

Date Screened: 10/31/2013

Investigation

Investigation ID: [REDACTED]

First County/Region [REDACTED]

Date/Time Assigned : 11/01/2013 10:46 AM

First Team Leader Assigned: [REDACTED]

Date/Time 11/01/2013 12:00 AM

First Case Manager [REDACTED]

Date/Time 11/01/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	8 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: Letter

Narrative: TFACTS:

Family Case IDs: [REDACTED]

Open Court Custody/FSS/FCIP: No

Closed Court Custody None

Open CPS- 08/24/13, # [REDACTED] ENN & LOS & DEI, CM [REDACTED]

Indicated None

Fatality No

Screened out 0



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

History (not listed above): None

DUPLICATE REFERRAL: NO

County: [REDACTED]

Notification: Letter

School/ Daycare: Unknown

Native American Descent: Unknown

Directions: [REDACTED]

Note: Address, demographics and applicable phone numbers are listed under the oldest child victim, [REDACTED]

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

The child was not in DCS custody.

Reporter states: [REDACTED] [REDACTED] (2 months) was the birth child of [REDACTED] [REDACTED] [REDACTED] resides in the home with the maternal grandparents [REDACTED] and Unknown [REDACTED]. There are no other children in the home and this is the first case that the case worker has worked on with this family.

The child was born on [REDACTED] with Vacterl Syndrome. It is reported to be a non-random association with birth defects. The child's rectum was blocked, and he was missing his brain and kidney tissue. This was not related to any child abuse or neglect. The child was also born prematurely at 30 weeks. The child had not left the hospital since birth.

[REDACTED] passed away on 10-15-2013 at [REDACTED] Children's Hospital in the NICU. The hospital did not inform the case worker of this information. Today 10-31-2013 the mother notified DCS that the child had passed away when the case worker contacted the mother to schedule an appointment to see the baby.

In August 2013, the mother had an open case for Lack of supervision, Environmental neglect, and Drug exposed infant. The mother tested positive for benzodiazepine, but the child's meconium was negative and his urine screen was clean. The report investigation number for this open case is # [REDACTED]. It was later reported that the mother had a prescription for the benzodiazepine.

The home was visited on 09-26-2013 by the case worker and it appeared to be clean. The case worker met with the maternal grandmother in the home because the child's mother was at the hospital with the child and she appeared to be appropriately caring for the child at the hospital. The mother was also admitted to the hospital due to her diabetes and blood pressure condition after giving birth to the child.

The child is presently deceased and passed away while there was an open case. It is added that the family was very cooperative with the case workers. No further information is known or reported at this time.

Know special needs/disabilities: The mother is diagnosed with Bipolar disorder and Depression. She is also diabetic.

Per SDM: Investigative Track, P1-lowered to INV P/2 [REDACTED] [REDACTED] Team Leader, 10/31/2013 @ 5:53 pm

Per TC [REDACTED] [REDACTED] lowered to P2 no immediate harm factors no other children in the home

Child Death Notification submitted by email to [REDACTED]

CC: Regional Administrator [REDACTED] [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: [REDACTED] Race: [REDACTED] Age: 24 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 8 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

None

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:

Participant ID: [REDACTED]

SSN:

Race:

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:

Name: Unknown Participant [REDACTED] Unknown

Gender: Male

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

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]
Referral Date: 10/31/2013
Street Address:
City/State/Zip:

Investigation ID: [Redacted]
Assignment Date: 11/01/2013

B. Allegation

Table with 9 columns: #, Children's Name, DOB/SSN, Specific Allegation for Each Child, Alleged Perpetrator's Name, DOB/SSN, Classification, Severe Abuse, Classified By/Classified Date. Row 1: 1, [Redacted], [Redacted], Neglect Death, [Redacted], [Redacted], Allegation Unsubstantiated / Perpetrator Unsubstantiated, Yes, [Redacted] 11/19/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed
Comments: CPSA is closing this case as AUPU.

D. Case Workers

Case Worker: [Redacted] Date: 11/19/2013
Team Leader: [Redacted] Date: 11/19/2013

E. Investigation Summary

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

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

[Redacted] passed away on 10/15/13. He had VACTERL syndrome and his prognosis was not good since birth.

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

NA

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

CPSA completed a home visit on 11/1/13. CPSI offered her condolences to Ms. [Redacted] and Mr. [Redacted] on the loss of their son. Ms. [Redacted] reported that it was not a shock for them, since they knew that this might happen and having been preparing their minds for it. Ms. [Redacted] and Mr. [Redacted] both reported that they have been doing well and coping with this. CPSI advised grief counseling if needed and the couple reported that they would consider this if needed. The couple reported that their family members have been helping them get through this. Ms. [Redacted] reported that she would continue living here with her mother for now.



**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]

CPSI gave the couple contact cards and asked them to contact CPSA with any questions.

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

There were no witnesses.

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

CPSA received this case with the allegation of neglect death. [REDACTED] was born with VACTERL syndrome, a non-random association of birth defects. He passed away on 10/15/13 at [REDACTED] Children's hospital where he had remained since his birth on 8/14/13. Even though [REDACTED] death was not as a result of abuse or neglect, this referral was made, per policy since [REDACTED] was involved with DCS at the time of his death. CPSA convened CPIT and faxed referrals to LE, CAC and ADA, [REDACTED]. A home visit was completed and Mr. [REDACTED] and Ms. [REDACTED] reported that they were doing well and dealing with this issue. The family has a good support system but CPSI recommended that they participate in grief counseling, if needed.

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



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/19/2013

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/19/2013

Completed date: 11/19/2013

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: 11/19/2013 11:01 AM Entered By: [REDACTED]

TI [REDACTED] has reviewed this case and I is ready for closure. This case is being closed as unfounded for neglect death. This child due to medical complications not as a result of any abuse or neglect. Services have been offered to the family. All task are completed. There are no other children in 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: 11/19/2013

Contact Method:

Contact Time: 10:41 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/19/2013

Completed date: 11/19/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/19/2013 10:41 AM Entered By: [REDACTED]

CASE SUMMARY FOR CLOSURE

CPSA received this case with the allegation of neglect death. [REDACTED] was born with VACTERL syndrome, a non-random association of birth defects. He passed away on 10/15/13 at [REDACTED] Children's hospital where he had remained since his birth on 8/14/13. Even though [REDACTED] death was not as a result of abuse or neglect, this referral was made, per policy since [REDACTED] was involved with DCS at the time of his death. CPSA convened CPIT and faxed referrals to LE, CAC and ADA, [REDACTED]. A home visit was completed and Mr. [REDACTED] and Ms. [REDACTED] reported that they were doing well and dealing with this issue. The family has a good support system but CPSI recommended that they participate in grief counseling, if needed.

Form 0635, Notification of Child Death/Near Death was completed on 10/31/13 per policy.

CPSA presented this case to CPIT on 11/18/13. The team classified this case as AUPU.

Juvenile court judge and the ADA were notified per local protocol. Copies of 740 and SDM are in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	11/18/2013	Contact Method:	Face To Face
Contact Time:	12:30 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	11/19/2013
Completed date:	11/19/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:24 AM Entered By: [REDACTED]

CPIT STAFFING

CPSA staffed this case on this date.

The team agreed to classify this case as 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:	11/15/2013	Contact Method:	
Contact Time:	11:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	11/19/2013
Completed date:	11/19/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:29 AM Entered By: [REDACTED]

INTERNET AND SSMS CHECKS

CPSI completed the following on [REDACTED] and [REDACTED]

- Health Abuse Registry: No Results
- Meth Offender Registry: No Results
- Felony Offender: No Results
- Criminal Record: No Results.
- SSMS: No Results



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:	11/15/2013	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	11/19/2013
Completed date:	11/19/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:27 AM Entered By: [REDACTED]

NOTATION

CPSA completed background checks on this date.

[REDACTED]
No record

[REDACTED]
No record



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: 11/01/2013

Contact Method: Face To Face

Contact Time: 06:30 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 11/19/2013

Completed date: 11/19/2013

Completed By: [REDACTED]

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

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

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:16 AM Entered By: [REDACTED]

HOME VISIT

Child Protective Services Investigator, [REDACTED] (CPSA) completed a home visit with the family to continue this investigation.

CPSA asked for and obtained permission from Mr. [REDACTED] to enter the home.

CPSA, [REDACTED] mother and [REDACTED] father were present.

In order to engage the family, CPSI explained the current report made to the Tennessee Department of Children's Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

*Section I: Interview with the child (private or not private; if not why? And location of interview)

Document:

- concerns of child;
- childs feelings in general, about school, about services;
- discussion of case planning process in age-appropriate manner

[REDACTED] passed away on 10/15/13.

*Section II: Interview with the mother (private or not private and location of interview)

Interview should include questions regarding the childrens pediatrician, mental health, physical health/disabilities, medications, domestic violence history, alcohol/drug usage, childrens school attendance/performance, DCS history,



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

police history, employment, education levels, government assistance, past abuse/neglect, etc.

Document:

discussion of current safety and risk concerns;
 discussion of child's well-being needs ex: sharing info about, eliciting her perceptions of child's health, development, mental health, education;
 discussion of status of case: CFTM decisions, preparing for next CFTM, goal/action steps and timeframes; discussion of parents opinion about current case situation and what they feel is needed to make progress;
 discussion of services delivery and parents feelings on effectiveness of services

(If parent is absent, where are they? How have we attempted to contact them? What is the status of their relationship with child?)

CPSA interviewed Ms. [REDACTED] and Mr. [REDACTED] on this date. CPSA offered her condolences to Ms. [REDACTED] and Mr. [REDACTED] on the loss of their son. Ms. [REDACTED] reported that it was not a shock for them, since they knew that this might happen and having been preparing their minds for it. Ms. [REDACTED] and Mr. [REDACTED] both reported that they have been doing well and coping with this. CPSA advised grief counseling if needed and the couple reported that they would consider this if needed. The couple reported that their family members have been helping them get through this. Ms. [REDACTED] reported that she would continue living here with her mother for now.

CPSA gave the couple contact cards and asked them to contact CPSA with any questions.

***Section III: Interview with the father (private or not private and location of interview)**

Interview should include questions regarding the child's pediatrician, mental health, physical health/disabilities, medications, domestic violence history, alcohol/drug usage, child's school attendance/performance, DCS history, police history, employment, education levels, government assistance, past abuse/neglect, etc.

Document:

discussion of current safety and risk concerns;
 discussion of child's well-being needs ex: sharing info about, eliciting her perceptions of child's health, development, mental health, education;
 discussion of status of case: CFTM decisions, preparing for next CFTM, goal/action steps and timeframes; discussion of parents opinion about current case situation and what they feel is needed to make progress;
 discussion of services delivery and parents feelings on effectiveness of services

(If parent is absent, where are they? How have we attempted to contact them? What is the status of their relationship with child?)

***Section IV: Interview with other household members (private or not private and location of interview)**

*The family identified ____ as a support.

Section V: CPSA observed:

Mr. [REDACTED] and Ms. [REDACTED] welcomed CPSA to their home. They are still going through the grief process but seemed to be comforting each other at this time. The family has a good support system in place but willing to try counseling if needed. CPSA did not observe any safety issues in the home.

***Required: Section VI: Next Steps: (What are the family's next steps to move the case forward? What are the case manager's next steps to move case forward or monitor case?)**

CPSA will present this case to CPIT and prepare to close it.



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: 11/01/2013 Contact Method: Face To Face
 Contact Time: 06:30 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 11/19/2013
 Completed date: 11/19/2013 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Alleged Perpetrator Interview, Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:50 AM Entered By: [REDACTED]
 HOME VISIT

Child Protective Services Investigator, [REDACTED] (CPSA) completed a home visit with the family to continue this investigation.

CPSA asked for and obtained permission from Mr. [REDACTED] to enter the home.

CPSA, [REDACTED] mother and [REDACTED] father were present.

In order to engage the family, CPSI explained the current report made to the Tennessee Department of Children's Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

*Section I: Interview with the child (private or not private; if not why? And location of interview)

Document:

- concerns of child;
- child's feelings in general, about school, about services;
- discussion of case planning process in age-appropriate manner

[REDACTED] passed away on 10/15/13.

*Section II: Interview with the mother (private or not private and location of interview)

Interview should include questions regarding the child's pediatrician, mental health, physical health/disabilities, medications, domestic violence history, alcohol/drug usage, child's school attendance/performance, DCS history, police history, employment, education levels, government assistance, past abuse/neglect, etc.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Document:

discussion of current safety and risk concerns;
discussion of child's well-being needs ex: sharing info about, eliciting her perceptions of child's health, development, mental health, education;
discussion of status of case: CFTM decisions, preparing for next CFTM, goal/action steps and timeframes; discussion of parents opinion about current case situation and what they feel is needed to make progress;
discussion of services delivery and parents feelings on effectiveness of services

(If parent is absent, where are they? How have we attempted to contact them? What is the status of their relationship with child?)

CPSA interviewed Ms. [REDACTED] and Mr. [REDACTED] on this date. CPSA offered her condolences to Ms. [REDACTED] and Mr. [REDACTED] on the loss of their son. Ms. [REDACTED] reported that it was not a shock for them, since they knew that this might happen and having been preparing their minds for it. Ms. [REDACTED] and Mr. [REDACTED] both reported that they have been doing well and coping with this. CPSA advised grief counseling if needed and the couple reported that they would consider this if needed. The couple reported that their family members have been helping them get through this. Ms. [REDACTED] reported that she would continue living here with her mother for now.

CPSA gave the couple contact cards and asked them to contact CPSA with any questions.

*Section III: Interview with the father (private or not private and location of interview)

Interview should include questions regarding the child's pediatrician, mental health, physical health/disabilities, medications, domestic violence history, alcohol/drug usage, child's school attendance/performance, DCS history, police history, employment, education levels, government assistance, past abuse/neglect, etc.

Document:

discussion of current safety and risk concerns;
discussion of child's well-being needs ex: sharing info about, eliciting her perceptions of child's health, development, mental health, education;
discussion of status of case: CFTM decisions, preparing for next CFTM, goal/action steps and timeframes; discussion of parents opinion about current case situation and what they feel is needed to make progress;
discussion of services delivery and parents feelings on effectiveness of services

(If parent is absent, where are they? How have we attempted to contact them? What is the status of their relationship with child?)

*Section IV: Interview with other household members (private or not private and location of interview)

*The family identified ___ as a support.

Section V: CPSA observed:

Mr. [REDACTED] and Ms. [REDACTED] welcomed CPSA to their home. They are still going through the grief process but seemed to be comforting each other at this time. The family has a good support system in place but willing to try counseling if needed. CPSA did not observe any safety issues in the home.

*Required: Section VI: Next Steps: (What are the family's next steps to move the case forward? What are the case manager's next steps to move case forward or monitor case?)

CPSA will present this case to CPIT and prepare to close it.



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:	11/01/2013	Contact Method:	Correspondence
Contact Time:	01:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	11/19/2013
Completed date:	11/19/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:04 AM Entered By: [REDACTED]

CPIT

CPSA convened CPIT on this date.

Copies of referral were faxed and also emailed to [REDACTED] PD, CAC and ADA, [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:	11/01/2013	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/19/2013
Completed date:	11/19/2013	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 10:00 AM Entered By: [REDACTED]

REFERENT NOTIFICATION

CPSI notified referent of case assignment.



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: 10/31/2013

Contact Method:

Contact Time: 04:59 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/19/2013

Completed date: 11/19/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/19/2013 09:55 AM Entered By: [REDACTED]

CASE ASSIGNMENT

CPSA received this case on 10/31/13 as a P2 with the allegation of neglect death. The victim was listed as [REDACTED] and alleged perpetrator was [REDACTED] birth mother. Report stated that [REDACTED] (2 months) was the birth child of [REDACTED]. [REDACTED] resides in the home with the maternal grandparents [REDACTED] and Unknown [REDACTED]. There are no other children in the home and this is the first case that the case worker has worked on with this family.

The child was born on [REDACTED] with Vacterl Syndrome. It is reported to be a non-random association with birth defects. The child's rectum was blocked, and he was missing his brain and kidney tissue. This was not related to any child abuse or neglect. The child was also born prematurely at 30 weeks. The child had not left the hospital since birth.

[REDACTED] passed away on 10-15-2013 at [REDACTED] Childrens Hospital in the NICU. The hospital did not inform the case worker of this information. Today 10-31-2013 the mother notified DCS that the child had passed away when the case worker contacted the mother to schedule an appointment to see the baby.

In August 2013, the mother had an open case for Lack of supervision, Environmental neglect, and Drug exposed infant. The mother tested positive for benzodiazepine, but the child's meconium was negative and his urine screen was clean. The report investigation number for this open case is # [REDACTED]. It was later reported that the mother had a prescription for the benzodiazepine.

The home was visited on 09-26-2013 by the case worker and it appeared to be clean. The case worker met with the maternal grandmother in the home because the child's mother was at the hospital with the child and she appeared to be appropriately caring for the child at the hospital. The mother was also admitted to the hospital due to her diabetes and blood pressure condition after giving birth to the child.

The child is presently deceased and passed away while there was an open case. It is added that the family was very cooperative with the case workers. No further information is known or reported at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Know special needs/disabilities: The mother is diagnosed with Bipolar disorder and Depression. She is also diabetic.

TFACTS HISTORY

The family has the following:

8/22/13

Allegation: environmental neglect, lack of supervision, drug exposed child

Victim: [REDACTED]

Perpetrator: [REDACTED]

Classification: AUPU.

JUDICIAL NOTIFICATION

Juvenile court judge was notified of referral per local protocol.



Tennessee Department of Children's Services
Case Recording Summary

Case Id:	██████████	Case Name:	██████████ ██████████
Case Status:	Close	Organization:	████████████████████████████████████████

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	09/16/2013	Contact Method:	Phone Call
Contact Time:	12:00 PM	Contact Duration:	Less than 15
Entered By:	██████████ ██████████ ██████████	Recorded For:	
Location:		Created Date:	11/19/2013
Completed date:	11/19/2013	Completed By:	██████████ ██████████ ██████████
Purpose(s):	Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/19/2013 02:56 PM Entered By: ██████████ ██████████ ██████████

COLLATERAL CONTACT

CPSA spoke with ██████████ ██████████ Social worker on this date. Ms. ██████████ informed CPSA that the prognosis was not looking good for ██████████. She reported that they have carried out more MRI of his brain and it was showing more tissues missing. She reported that ██████████ also has more anomalies than originally thought. She reported that ██████████ would be needing long term care if he makes it and they were concerned about the family's ability to take on this responsibility. She reported that the doctors have cancelled some corrective surgeries already scheduled for ██████████. Ms. ██████████ informed CPSA that the team of doctors would be discussing all this with the family on this date. CPSA informed Ms. ██████████ that CPSA has not had any cause to think that the family would not be able to care for ██████████. CPSA informed her that CPSA observed a good interaction with the couple and that they have a good support system.

Ms. ██████████ expressed some concerns regarding Ms. ██████████. She reported that it has been difficult to get her to wake up sometimes when nurses come in the room for ██████████ care. She reported that she hoped that the mother was not abusing drugs. CPSA informed her that her first drug screen was clean but that CPSA would give her another one 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: 8/22/13 1:11 PM

Date of Assessment: 8/23/13 12:00 AM

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

Number of Children in the Household: 1

Section 1: Immediate Harm Factors

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

Yes No

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



Tennessee Department of Children's Services

SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

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

Protective Custody Interventions:

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



Tennessee Department of Children's Services
SDM™ Safety Assessment

Section 3: Safety Decision

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

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