



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

Case # 2013.123ph

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	12/05/2013	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	12/05/2013		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input type="checkbox"/> Male	<input checked="" type="checkbox"/> Female	Race/Ethnicity:	White (Non Hispanic)	County/Region:	██████████
Parents' Names:	Mother:	██████████	Father:	██████████		
Alleged Perpetrator's Name:	unknown		Relationship to Victim:	unknown		
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:

Child was taken to ██████████ in ██████████ by her parents. Parents had contacted 911 enroute to the hospital and reported that their daughter was found unresponsive when they checked on her in her crib after she had been laid down for a nap. Medical personnel attempted to revive the child upon arrival at the hospital but were unsuccessful and the child was pronounced deceased at 1:56pm on December 5, 2013. There were no physical indications or suspicions of abuse noted by the physician.

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

Name of Physician:	██████████	Telephone #	() -
Street Address:	██████████	City/State/Zip:	██████████

Describe (in detail) interview with family:

Parents were interviewed separately by law enforcement and provided statements that were consistent in their time frames and the events leading up to the fatality. Child was born extremely premature at 26 weeks and weighed just a little over one pound at birth. Child suffered from numerous medical conditions due to her prematurity, including kidney problems, vision issues, allergies, breathing problems, etc. Parents had maintained appointments with specialists and Tennessee Early Interventions has been working with the child in the home. ██████████ was reported to have had a slight fever on the morning of 12/05/13 but her fever had subsided after being given Children's Tylenol. ██████████ was placed in her crib for a nap late that same morning and the parents had checked on her numerous times before finding her unresponsive in her crib. Parents reported that they rushed their child to the emergency room because they felt they could get there faster than waiting for EMS to respond to their address.

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

N/A

Describe disposition of body (Death):	██████████ Pathology			
Name of Medical Examiner/Coroner:	unknown	Was autopsy requested?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
Did CPS open an investigation on this Death/Near Death?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes		
Was there DCS involvement at the time of Death/Near Death?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes		
Type:	CPS Investigation (concerning an older half-sibling and the alleged perpetrator is that child's biological father who does not reside in the home)	Case #:	██████████	

Describe law enforcement or court involvement, if applicable:

The ██████████ Sheriff's Department responded to the hospital and to the child's residence. Both parents were interviewed by law enforcement and statements provided were found to be consistent and credible. There was no evidence of neglect or abuse in the home which was observed by law enforcement and CPS. There is no current court

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action and none that is being initiated at this time.

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 were no known safety issues regarding the two older half-siblings of this child. Both children were observed to be healthy and closely bonded to their mother and stepfather. The children are currently staying with the maternal grandparents who have been closely involved in their lives and with whom they have resided with before. There has been past CPS involvement with these two children and the grandparents have been a resource for the children in the past.

Name: [redacted]	Age: 7 yrs.
Name: [redacted]	Age: 5 yrs.
Name:	Age:
Name:	Age:
Name:	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
03/01/2011	[redacted]	SAE	[redacted]	[redacted]	AUPU
08/19/2011	[redacted]	DEC	[redacted] & [redacted]	[redacted] & [redacted]	AUPU
09/28/2012	[redacted]	SAE	[redacted]	[redacted]	AUPU
03/11/2013	[redacted]	PHA & MDM	[redacted] & [redacted]	[redacted]	AUPU
11/04/2013	[redacted]	PHA	[redacted]	[redacted]	not classified /open
/ /					
/ /					

Any media inquiry or is attention expected? No Yes List organizations requesting information:

Contact Person/Phone Number(s) (include CM, TL, and TC):

Contact Person:	Telephone Number: () -
Case Manager: [redacted]	Telephone Number: [redacted]
Team Leader: [redacted]	Telephone Number: [redacted]
Team Coordinator: [redacted]	Telephone Number: [redacted]

ATTACH a copy of the TFACTS Incident Report or if TFACTS is inoperable, DCS Form CS-0496, Serious Incident Report to this notice. No Yes

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]



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 12/05/2013 04:48 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 12/05/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 12/06/2013 07:56 AM
First Team Leader Assigned: [REDACTED] Date/Time 12/06/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 12/06/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 10 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	1 Yr 10 Mos	Neglect Death	Yes	[REDACTED]	Birth Father

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 Cases [REDACTED] and [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - [REDACTED] PHA/ 11/4/2013/ CM: [REDACTED] / supervisor [REDACTED] (INVT: A.V. [REDACTED])
A.P. [REDACTED]

Indicated 0

Fatality No

Screened out 7

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

History (not listed above):

7/31/2013/ [REDACTED] PHA/ MDM/ No Services Needed
3/22/2011/ [REDACTED] SEE/ Allegation Unfounded/Perpetrator Unfounded
10/10/2011/ [REDACTED] DEC/ Allegation Unfounded/ Perpetrator Unfounded
1/29/2013/ [REDACTED] SEE/ Allegation Unfounded/Perpetrator Unfounded
5/25/2007/ [REDACTED] LOS/ No Services Needed

County: [REDACTED]
Notification: Letter
School/ Daycare: None
Native American Descent: No
Directions: None Given

Reporters name/relationship: [REDACTED] [REDACTED]

Reporter states: [REDACTED] (1 year, 5 months) lives with her father [REDACTED] and mother [REDACTED]. There are no other children in the home (to the reporters knowledge).

[REDACTED] was born at 26 weeks gestation. She spent four months in the hospital after birth. [REDACTED] has asthma and one of her kidneys is smaller than the other. There are no other health concerns noted for [REDACTED] at this time.

On December 5, 2013 at approximately 1:00 PM, [REDACTED] was laid down for a nap. At approximately 1:30 PM, [REDACTED] went to check on [REDACTED] and she was unresponsive. The father said [REDACTED] was cold and her face was blue and purple. [REDACTED] yelled to [REDACTED] and they jumped in the car to take [REDACTED] to the emergency room at [REDACTED] Medical Center.

Emergency room personnel worked on [REDACTED] for approximately 15 minutes before pronouncing her dead at 1:56 PM. Both parents were home with [REDACTED] at the time of her passing.

[REDACTED] had no marks, bruises or abrasions to be concerned about. The emergency room physician [REDACTED] did not seem to think there was any foul play. [REDACTED] body has been sent for an autopsy per the county medical examiner ([REDACTED]). The parents are being interviewed at this time by the [REDACTED] Sheriff's Office. At this time, the parents have not disclosed of any information that would explain the child's death.

It is unknown at this time what the home condition is or if there are any hazards. It is unknown if there was a past criminal history for the parents or past death in the home.

The reporter did not request immediate assistance on this matter.

NOTE: The reporter did not have the date of birth for the mother or father.

SSMS: Negative for [REDACTED] [REDACTED] and [REDACTED]

NOTE: There seems to be two other children who may be in the home. Per TFACTS history/relationships in family case [REDACTED] (DOB [REDACTED]) has two other daughters ([REDACTED] DOB [REDACTED] and [REDACTED] DOB [REDACTED]). The same address is given on the two girls Person Records in TFACTS ([REDACTED]) as was given for [REDACTED] in this report.

Per SDM: Investigative Track, P1 (severe [REDACTED] CMII on 12/5/13 at 5:10 PM.
[REDACTED] TL on 12-5-13 @ 5:21 pm, County paged in MIR3 @ 5:31 pm

Notified Child Death Group [REDACTED]
Northeast RA [REDACTED] was copied on the notification email.



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

5:31 pm [REDACTED] (CPS On Call for [REDACTED]) called stating that he is already on scene in regards to this report. Supervisor/CM3 [REDACTED] is also on scene as well at this time. Law enforcement is also present at the scene. The on call supervisor is [REDACTED].

Recipients	Time Issued	Response Received	Devices	Responses	
[REDACTED]	12-05-13 05:31:27 PM CST	12-05-13 05:32:13 PM CST	[REDACTED]	[REDACTED]	Received
	12-05-13 05:31:27 PM CST	---	[REDACTED]	Answering Machine	
	12-05-13 05:31:27 PM CST	---	[REDACTED]	Email Sent	

Intake is being submitted at 5:33 pm



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 1 Yr 10 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED] Investigation ID: [REDACTED]
 Referral Date: 12/05/2013 Assignment Date: 12/06/2013
 Street Address: [REDACTED]
 City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED]
		[REDACTED]			[REDACTED]			01/11/2014
2	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	*Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED]
		[REDACTED]			[REDACTED]			02/04/2014

C. Disposition Decision

Disposition Decision: Refer for Other Services and Close
 Comments: Family was referred for grief counseling.

D. Case Workers

Case Worker: [REDACTED] Date: 01/11/2014
 Team Leader: [REDACTED] Date: 01/11/2014

E. Investigation Summary

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

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

[REDACTED] was deceased at the time of this referral and could not be interviewed. [REDACTED] has two older half-siblings in the home, [REDACTED] and [REDACTED] who were observed at the hospital and at the home. Both of these children appear to be healthy and closely bonded to their mother and stepfather and they expressed no needs or concerns. The home is a small two-bedroom apartment that was very neat and organized and there were no safety hazards observed for the siblings in the home. Law enforcement took photographs of the home on the night of the fatality and are included in a disc in the hard file.

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



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

Medical records are included in the case file but autopsy results have not been obtained to date.

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

Both parents were interviewed separately by law enforcement on the date of [REDACTED] death and provided consistent statements regarding the events leading up to their daughter's death. (Copies of statements included in case file.) Child had woken up feeling bad and running a low-grade fever and was given medication (Children's Tylenol) which appeared to lower her temperature and make her feel better. Child was put down in her crib for a nap and was discovered unresponsive by her father.

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

N/A

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

Case was presented to CPIT and the allegation of Neglect Death against the parents is being classified as AUPU.

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: 01/21/2014 Contact Method:
 Contact Time: 10:41 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 01/21/2014
 Completed date: 01/21/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/21/2014 09:41 AM Entered By: [REDACTED]

Date: 1/21/2014

Purpose:

TL [REDACTED] reviewed this case for closure. The following tasks were completed on the dates indicated and documented by TL as directed by the CPS Corrective Action Plan.

Date of Referral: 12/5/2013
 Initial Notification to Juvenile Court: 12/6/2013
 Notification to DA: 12/6/2013
 Law Enforcement Notification: 12/6/2013
 CAC Notification: 12/6/2013
 SDM Safety Assessment: not completed, victim deceased
 FAST: na
 CS-0740 Sent to Juvenile Court: 1/11/2014



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: 01/10/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/10/2014

Completed date: 01/11/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/11/2014 01:01 PM Entered By: [REDACTED]

Case is being presented for closure on this date. Referral was received with the allegation of NGD on ACV [REDACTED] a 17 mo. old female, a against her parents, [REDACTED] and [REDACTED]. Child was deceased at time of referral after being transported to [REDACTED] ER by her parents when they found her in her crib unresponsive after a nap. Medical staff at the hospital did not suspect any neglect or abuse and an autopsy was ordered to determine the cause of the child's death. [REDACTED] was born extremely premature and was not released from NICU until she was four months old. [REDACTED] lungs were compromised due to her prematurity and she had one kidney which was not growing. [REDACTED] was seen by numerous specialists due to her conditions and received services from TEIS in the home. The parents reported that [REDACTED] had woken up on the morning of 12/05/2013, and was running a low-grade fever which they treated with Children's Tylenol. [REDACTED] appeared to be feeling better when they laid her down for a nap and they checked on her a few times during her nap but when the father went into her room the last time, he discovered that she was not breathing and they rushed her to the hospital which is approximately a five minute drive from their home. [REDACTED] was pronounced deceased at the emergency room. The department was involved with [REDACTED] half-siblings, [REDACTED] and [REDACTED] at the time of this referral due to allegations of physical abuse by their biological father, [REDACTED]. That investigation was just closed as ASPS and the children's visitations have been stopped at this time with Mr. [REDACTED]. There are no safety hazards known for the siblings in the home of their mother and stepfather. Medical records were obtained on [REDACTED] and reviewed by Dr. [REDACTED] (CPI team member,) the preliminary autopsy shows no signs of abuse, and the case is being closed as AUPU. Autopsy report will be forwarded to [REDACTED] upon receipt and reviewed by CPIT. 740 forwarded to [REDACTED] Juvenile Court per local protocol.



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: 01/10/2014

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: 01/10/2014

Completed date: 01/10/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/10/2014 09:28 AM Entered By: [REDACTED]

Case was presented to CPIT on this date. Medical records were reviewed by Dr. [REDACTED] Team was in unanimous agreement to classify the allegation of NGD as AUPU pending the results of the autopsy. Hard copy of CPIT form located in file.



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:	01/10/2014	Contact Method:	
Contact Time:	08:05 AM	Contact Duration:	Less than 01 Hour
Entered By:	████████████████████	Recorded For:	
Location:		Created Date:	01/10/2014
Completed date:	01/10/2014	Completed By:	████████████████████
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/10/2014 03:04 PM Entered By: ████████████████████

Cm picked up medical records on ██████████ from ██████████ and ██████████ Pediatrics on this date. Due to ██████████ being extremely premature and spending months in the NICU, the medical records from ██████████ were approximately 3,000 pages and filled a large carton. Medical records from ██████████ included the records from the kidney and lung specialists that treated ██████████. Cm will include only the pertinent records in the hard file due to the large volume of records and will shred remaining records that are not pertinent.



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: 01/09/2014

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/10/2014

Completed date: 01/10/2014

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: 01/10/2014 02:58 PM Entered By: [REDACTED]

Cm faxed releases and contacted [REDACTED] Pediatrics and [REDACTED] Medical Center by telephone on this date. Cm made arrangements to pick up medical records on [REDACTED] the following morning.



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: 01/08/2014 Contact Method: Face To Face
Contact Time: 03:00 PM Contact Duration: Less than 02 Hour
Entered By: [Redacted] Recorded For:
Location: Family Home Created Date: 01/10/2014
Completed date: 01/10/2014 Completed By: [Redacted]
Purpose(s): Safety - Child/Community
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning

Participant(s)

[Redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/10/2014 10:37 AM Entered By: [Redacted]

Cm returned to family residence on this date and met with the parents and siblings of [Redacted] Cm was invited into the residence by [Redacted] who answered the door. [Redacted] and [Redacted] were home due to the school being closed due to the weather conditions. The children both reported that they were excited about returning to school the next day after Christmas break and the school remaining closed due to the cold temperatures. Cm observed both children to be very neat in appearance and both children demonstrated a close bond with their mother and stepfather. [Redacted] had a red mark on her chin that was very prominent and [Redacted] explained that [Redacted] has a nervous habit of picking her skin until it becomes irritated and this compulsive behavior is part of her diagnosis and why she is being treated with medications. The girls have extensive allergies and do not have any pets because of these allergies. Cm observed the residence to be extremely neat and organized. A genogram was initiated during the home visit and the parents were provided an explanation and copies of the Client's Rights Handbook, HIPAA Notification of Privacy, and Notification of Equal Access and signed acknowledgements of receipt. The family denied any Native American Indian ancestry and signed the veto form. Hard copy of all document acknowledgements located in file. A release of information was obtained for medical records on [Redacted] from the pediatrician and the hospital. [Redacted] confirmed with Cm that Cm had been the CPS worker at the home on the night that [Redacted] passed away. [Redacted] told Cm that he appreciated Cm talking to him that evening because he had felt the need to talk about his daughter and the events of that day and Cm was willing to listen. [Redacted] went on to state that he had thought a woman who had come to the home after [Redacted] had died was this Cm and he had invited her into the home, asked if she would like something to drink, etc. This woman had turned out to be an employee of Walgreens Pharmacy where the family gets their prescriptions filled and the woman had learned that [Redacted] had died and had come out to the home in the role of a Jehovah's Witness. [Redacted] stated that this woman had told them that she found their address in the telephone book but this had not been true because they do not have a land line and are not published in the phone book. [Redacted] stated that she felt it was unethical to look up the family's address in the computer at Walgreens and Cm advised the family to call the pharmacy if they wanted to complain about this occurrence. [Redacted] asked Cm if she was aware that [Redacted] ([Redacted] and [Redacted] biological father) was being indicated by CPS in [Redacted] for physical abuse and legal charges were pending as a result of that investigation. The children's GAL in [Redacted] has filed a motion stopping visitation between the children and their father as a result of that investigation and [Redacted] reported that the girls were both relieved not to have to visit with their father. [Redacted] has stated that she wants to be adopted by [Redacted] and change her last name to [Redacted]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Cm confirmed that the family had been scheduled for counseling and both [REDACTED] and [REDACTED] will be attending a session together next week. The children are already receiving counseling due to their ADHD issues and will continue with this counselor to address their grief issues. The parents reported that they take the children to the gravesite often and try to answer all their questions regarding the death of their sister. The girls are helping with a Valentine's tree to decorate [REDACTED] grave. [REDACTED] and [REDACTED] talked in length about [REDACTED] during the home visit and showed Cm photographs taken of [REDACTED] the week before her death. The parents expressed frustrations about not knowing the cause of their daughter's death and they were so scared that they had done something wrong, such as not taking her to the doctor when she woke up with the fever, not being aware that she had swallowed something and choked to death, etc. They have been calling the medical examiner's office requesting information but were told that a copy of the autopsy would be sent to them when it was completed and no other information could be provided. Cm advised the parents to speak about these concerns with the therapist who could assist them with coping mechanisms.

[REDACTED] stated that on days when she started feeling better, she would then feel guilty about that. Cm assured [REDACTED] that this was probably a very normal reaction to her loss.

Cm explained that the case would be presented to the Child Protective Investigative Team on 1/10/13 with the recommendation of AUPU but that the family was welcome to contact this Cm with any questions in the future.



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:	01/08/2014	Contact Method:	Attempted Face To Face
Contact Time:	10:50 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	01/10/2014
Completed date:	01/10/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Other Child Living in the Home Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/10/2014 09:44 AM Entered By: [REDACTED]

Cm attempted to contact [REDACTED] and [REDACTED] by telephone on this date to schedule a home visit but the phone number was not in service. Cm made an unannounced visit to the family residence but nobody answered the door. Cm left a note in the door requesting a phone call.

Cm received a call from [REDACTED] upon returning to the office apologizing for not answering the door due to being in the shower when Cm was at the home. A home visit was scheduled for this date at 3:00pm.



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: 12/16/2013

Contact Method: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/16/2013

Completed date: 01/10/2014

Completed By: [REDACTED]

Purpose(s): Service Planning, Well Being

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/16/2013 10:37 AM Entered By: [REDACTED]

Cm received a telephone call from [REDACTED] (mother) on this date. Ms. [REDACTED] reported that she was interested in obtaining the grief counseling that Cm had discussed with the family on the date of [REDACTED] death. Cm inquired about how the children had been doing and [REDACTED] reported that [REDACTED] has been having some "moments of acting out" but the school staff has been great. [REDACTED] stated that the guidance counselor is talking to [REDACTED] and [REDACTED] and that their teachers discussed this with the class also. [REDACTED] has told the girls that [REDACTED] is an angel and God took her to heaven because she was so perfect. [REDACTED] reported that it has been extremely difficult this week because [REDACTED] had a lot of medical appointments scheduled and she has had to call and cancel them. The family has placed a Christmas tree on [REDACTED] grave (she was buried on December 9th) and they have moved back into their apartment because she thought the children needed some sense of normalcy and that is their home.

[REDACTED] and [REDACTED] have not have any visitation with their father since the loss of their baby sister. The service provider who supervises these visits has told [REDACTED] that Mr. [REDACTED] (father) has been very irritated about the visitations not being scheduled. [REDACTED] does not know if Mr. [REDACTED] is going to face charges in the open investigation in [REDACTED] for physical abuse. The court hearing regarding the visitations still has to rescheduled due to the hearing being set for the week of [REDACTED] death. Cm discussed counseling needs for the family and [REDACTED] stated that all of the family would benefit from these services. Cm reported that she would contact the Children's Advocacy Center to determine if they could assist with expediting mental health counseling for the family.

Cm contacted the CAC and spoke with the executive director, [REDACTED] who reported that she would contact a counselor at [REDACTED] Mental Health to determine the steps required to set up this counseling and she would contact the family with the information.

Cm called the family back and spoke to [REDACTED] father, and explained that someone would be calling them regarding the counseling.



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:	12/06/2013	Contact Method:	Phone Call
Contact Time:	04:00 PM	Contact Duration:	Less than 30
Entered By:	████████████████████	Recorded For:	
Location:		Created Date:	12/08/2013
Completed date:	12/08/2013	Completed By:	████████████████████
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/08/2013 04:20 PM Entered By: ████████████████████

Cm contacted TEIS on this date and spoke with TEIS service coordinator ██████████ who reported that she saw ██████ one time per month for assessments and the provider had worked with ██████ much more often. The provider enters progress notes in the TEIS system so ██████ was able to observe those progress notes also. ██████ stated that she had more contact with ██████ due to ██████ working until recently but had also observed both parents interactions with ██████ without concern. The parents were reported to be very organized and maintained medical appointments for this child. ██████ reported that she had been informed of this tragedy earlier today by the mother who had called to cancel the appointment already made for a home visit.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/06/2013

Contact Method:

Contact Time: 02:55 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/06/2013

Completed date: 12/08/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/06/2013 02:05 PM Entered By: [REDACTED]

Referral was received on 12/05/13 and response was met on that date by this Cm. Referral was assigned to this Cm on 12/06/2013.

Allegation: Neglect Death

Response Priority: P-1

Referral reads as follows:

Reporter states: [REDACTED] (1 year, 5 months) lives with her father [REDACTED] and mother [REDACTED]. There are no other children in the home (to the reporters knowledge).

[REDACTED] was born at 26 weeks gestation. She spent four months in the hospital after birth. [REDACTED] has asthma and one of her kidneys is smaller than the other. There are no other health concerns noted for [REDACTED] at this time.

On December 5, 2013 at approximately 1:00 PM, [REDACTED] was laid down for a nap. At approximately 1:30 PM, [REDACTED] went to check on [REDACTED] and she was unresponsive. The father said [REDACTED] was cold and her face was blue and purple. [REDACTED] yelled to [REDACTED] and they jumped in the car to take [REDACTED] to the emergency room at [REDACTED] Medical Center.

Emergency room personnel worked on [REDACTED] for approximately 15 minutes before pronouncing her dead at 1:56 PM. Both parents were home with [REDACTED] at the time of her passing.

[REDACTED] had no marks, bruises or abrasions to be concerned about. The emergency room physician [REDACTED] did not seem to think there was any foul play. [REDACTED] body has been sent for an autopsy per the county medical examiner [REDACTED]. The parents are being interviewed at this time by the [REDACTED] Sheriff's Office. At this time, the parents have not disclosed of any information that would explain the child's death.

It is unknown at this time what the home condition is or if there are any hazards. It is unknown if there was a past criminal history for the parents or past death in the home.

The reporter did not request immediate assistance on this matter.

NOTE: The reporter did not have the date of birth for the mother or father.



Tennessee Department of Children's Services
Case Recording Summary

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

SSMS: Negative for ██████████ ██████████ and ██████████

NOTE: There seems to be two other children who may be in the home. Per TFACTS history/relationships in family case ██████████ ██████████ (DOB ██████████) has two other daughters ██████████ (DOB ██████████) and ██████████ (DOB ██████████). The same address is given on the two girls Person Records in TFACTS ██████████ as was given for ██████████ in this 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:	System Completed
Contact Date:	12/06/2013	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	12/08/2013
Completed date:	01/06/2014	Completed By:	System Completed
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 12/08/2013 04:05 PM Entered By: [REDACTED]

Cm went to the [REDACTED] Sheriff's Department on this date and Inv. [REDACTED] provided Cm with a dvd which included all the photographs taken of the child at the hospital and all photographs taken of the residence by the road officer and Inv. [REDACTED]. Cm provided law enforcement with a copy of the prescriptions/pill counts written down by this Cm at the home. Disc is located in 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:	12/06/2013	Contact Method:	Correspondence
Contact Time:	09:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	01/15/2014
Completed date:	01/15/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/15/2014 07:10 AM Entered By: [REDACTED]

Referral was scanned and emailed to the D.A.'s office and the CAC on this date. Referral (less R/S identifying info.) was faxed to [REDACTED] Juvenile Court. Law enforcement was already involved in this investigation prior to CPS being notified.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: System Completed
 Contact Date: 12/05/2013 Contact Method: Face To Face
 Contact Time: 04:50 PM Contact Duration: Less than 04 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 12/08/2013
 Completed date: 01/05/2014 Completed By: System Completed
 Purpose(s): Safety - Child/Community
 Contact Type(s): Alleged Perpetrator Interview, Collateral Contact, Initial ACV Face To Face, Other Child Living in the Home Interview/Observation, Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2013 03:22 PM Entered By: [REDACTED]

Cm responded to this referral at the emergency room at [REDACTED] on this date and met with Inv. [REDACTED] and Inv. [REDACTED] of the [REDACTED] Sheriff's Department. Inv. [REDACTED] reported that she had spoken to the emergency room doctor who had stated that there was no evidence of any type of trauma to the child upon admission to the emergency room. The physician had reported that the ACV had numerous health issues due to being born extremely premature and he did not suspect any type of neglect or abuse causing the fatality. Cm briefly observed the child in an examination room prior to the body being transported to [REDACTED] for an autopsy. Photographs of the child had been taken by Inv. [REDACTED] who reported that copies would be provided to this Cm. There were no injuries observed anywhere on the child's body and the child was clean and appeared to be small in stature for her age. Inv. [REDACTED] had spoken to both parents prior to this Cm arriving at the hospital and stated that they had been very appropriate in all their responses but statements had not been taken at this time. Two officers were waiting at the residence and the parents had reported that they would allow law enforcement to go into the home to take photographs of the home. Inv. [REDACTED] introduced this Cm to the family and Cm observed the older half-siblings, [REDACTED] and [REDACTED] with their grandparents in a private waiting room. The girls were neatly dressed and appeared to be healthy but it was apparent that they did not understand what was happening. Cm expressed condolences to the family and explained to the parents that it was routine for CPS to be notified and this did not indicate that any type of abuse was suspected. The parents reported that they understood and explained that a case was currently open due to physical abuse by [REDACTED] and [REDACTED] biological father, [REDACTED] but that investigation did not concern [REDACTED] (Cm was aware of this investigation and had a brief history of the family's involvement with CPS by this time.) The maternal grandmother, [REDACTED] reported that she was taking the girls home with her at this time and the parents stated that they were going home to open the residence for law enforcement. Cm explained that she would meet them at the residence.

Cm and Cm [REDACTED] on-call worker, went to the [REDACTED] residence in [REDACTED] at this time. The home is a small single level apartment with two bedrooms, a bathroom and a small living room/kitchen combination. There was some clutter in the living room of the home but the kitchen area was neat. The living room was filled by a sectional couch, a pack-n-play, a Christmas tree, a treadmill that was folded up, and a rolled up sleeping mat on the floor. The older girls share a bedroom that had two twin beds and was decorated nicely. [REDACTED] had her own bedroom with a crib that contained only a fitted sheet and bumper pads and there was an unidentified electrical part laying inside the crib



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

which was later identified as a car part that had been in her father's pocket when he found her in the crib unresponsive and had apparently fallen into the crib when he grabbed the child. Cm later learned that the bumper pads had been placed in the crib not too long ago because of [REDACTED] habit of banging her head against the railings. [REDACTED] had been born with a brain bleed and was seen by a neurologist regarding this issue.

There were numerous medication bottles on the kitchen counter and these medications were photographed and counted by law enforcement. Both [REDACTED] and [REDACTED] are prescribed Adderal and the pills counts were correct per the dosage instructions on all medications. [REDACTED] and [REDACTED] are both prescribed blood pressure medications and [REDACTED] had numerous medications that Cm did not recognize but those counts were also accurate and none were psychotropic medications or pain medications. Cm learned later in the evening that [REDACTED] has a serious blood disease and required numerous medications for this condition. Cm observed how organized the family was regarding doctor's appointments being recorded on a calendar, the children's allergies all listed on the refrigerator, and phone numbers for the school and medical providers also being listed in plain view. There was a note from a school teacher laying on the kitchen table thanking the parents for keeping school staff informed of changes in [REDACTED] medications

During the time that Cm was inside the home with law enforcement, [REDACTED] was sitting in a vehicle with Inv. [REDACTED] providing a statement of the day's events and [REDACTED] was being interviewed in another vehicle by Inv. [REDACTED]. Written statements were obtained from both parents and Cm spoke in length with [REDACTED] after his statement was completed due to [REDACTED] taking much longer. It was apparent that [REDACTED] was very upset and did not want to be alone, standing with Cm and Inv. [REDACTED] (who had taken photographs along with a road officer) and Inv. [REDACTED] spoke about taking the two older girls to school that morning, stopping at a fast food restaurant to pick up biscuits for him and [REDACTED] and the car breaking down on the way home. [REDACTED] had phoned [REDACTED] and explained why he wasn't back and had been able to get the car started again and return home. [REDACTED] had woken up that morning with a slight fever but had felt better after a dose of Children's Tylenol and then went down for a nap. [REDACTED] had reportedly checked on her a couple of times and [REDACTED] had also looked in on [REDACTED] during her nap. [REDACTED] had left at one point to pick up a car part (the one discovered in the crib) but stated that he had checked on her a couple of times also. [REDACTED] in the one who discovered that [REDACTED] was not breathing and ran to the hospital with her and his wife. [REDACTED] spoke about all the allergies that [REDACTED] and the other girls have and how they vacuumed twice a day and shampooed the carpets about two times a week to make sure that any allergens were removed. TEIS comes to the home once a week now and had just bumped this up now that [REDACTED] is old enough to have more therapy. [REDACTED] spoke about all the health issues that [REDACTED] had overcome since birth and how protective they have been of her due to her numerous conditions, such as one kidney not growing and the other kidney having some fluid retention. [REDACTED] lungs were also compromised by her prematurity and she has been on breathing treatments since birth but this had been getting better recently also. [REDACTED] spoke about his plan today to take [REDACTED] to the park since the weather was so mild and became upset because he thought she might still be alive if he had done this instead of working on the car.

[REDACTED] maternal grandmother, came to the home to pick up the girls' medications and car seats for them and spoke with Cm briefly. Cm had learned that the grandmother had been given custody of the two older children previously and asked [REDACTED] about this who stated that this had been when [REDACTED] and [REDACTED] were divorcing and [REDACTED] did not have her own place and was unable to provide a stable home for [REDACTED] and [REDACTED]. The grandmother reported that she did not have any concerns about her daughter or [REDACTED] caring for [REDACTED] or her sisters and that her daughter was a very good parent at this time in her life. Ms. [REDACTED] was also very understanding about law enforcement and CPS being involved in this situation and stated that she appreciated the role both organizations played in protecting children.

[REDACTED] finished providing her statement to Inv. [REDACTED] and Cm spoke briefly with Ms. [REDACTED] who was unable to enter the home at this time and reported that she would be going to her mother's house to be with the other children because she did not think that she could bear to see [REDACTED] belongings/room. Cm provided her contact information to the parents and explained that she would not be bothering them in the immediate future due to the circumstances but asked them to call Cm at a future date. Cm stated that she would be happy to assist the family with obtaining grief counseling or anything else they thought would be beneficial.

Cm contacted TC [REDACTED] and RA [REDACTED] before leaving the home and explained that Cm did not believe there were any safety concerns for the older children due to the lack of any evidence of abuse or neglect playing a role in this child's death.

Narrative Type: Addendum 1 Entry Date/Time: 01/15/2014 07:11 AM Entered By: [REDACTED]

Initial Safety Assessment could not be completed on [REDACTED] due to ACV being deceased at the time of the referral.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: System Completed
 Contact Date: 12/05/2013 Contact Method: Phone Call
 Contact Time: 04:15 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 12/06/2013
 Completed date: 01/05/2014 Completed By: System Completed
 Purpose(s): Safety - Child/Community, Service Planning
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Inv. [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/06/2013 02:16 PM Entered By: [REDACTED]

Cm received a telephone call from Inv. [REDACTED] of the [REDACTED] Sheriff's Department requesting CPS assistance on a child fatality at [REDACTED] in the emergency room. Inv. [REDACTED] reported that he did not have any demographic information on the victim or if there were siblings, etc., due to just being notified by his captain of the situation after being in court. Inv. [REDACTED] was reportedly at the hospital and Inv. [REDACTED] was waiting at the residence and ensuring that nobody entered the residence before

Narrative Type: Addendum 1 Entry Date/Time: 01/07/2014 12:01 PM Entered By: [REDACTED]

law enforcement could enter to obtain evidence/photographs of the home. Cm agreed to meet Inv. [REDACTED] at emergency room ASAP.



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: 01/07/2013

Contact Method: Phone Call

Contact Time: 12:45 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/07/2014

Completed date: 01/07/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/07/2014 11:59 AM Entered By: [REDACTED]

Cm spoke with Inv. [REDACTED] of the [REDACTED] SD on this date regarding the status of the autopsy on this child. Inv. [REDACTED] reported that all preliminary findings were that the child died of medical causes and there were no suspicions of foul play/abuse. Cm reported that Cm would be making an attempt at a home visit the next day due to the family's phone number not being in operation. Cm will obtain a release of info. for medical records from the PCP and specialists at that time. Inv. [REDACTED] will provide Cm with a copy of the SUDI form also.

Narrative Type: Addendum 1 Entry Date/Time: 01/07/2014 12:02 PM Entered By: [REDACTED]

**Phone call actually occurred on 1/07/2014, not 2013 as indicated in this recording.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker: [Redacted]

Date of Referral: 11/4/13 1:17 AM

Date of Assessment: 11/6/13 12:00 AM

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

Number of Children in the Household: 2

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):
[X] 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: _____