



Tennessee Department of Children's Services
Special Investigations (SIU) – Notification of Case Initiation and Closure

Notification: ☐ Initial ☐ Closure

Date of Notification:

Date of Referral:

Referral Number:

Date of Assignment:

Case ID:

Child(ren) Victim's Name	DOB	Adjudication	No of Previous SIU Referrals	County of Residence

	Children's Names	Allegations (If multiple, choose "other/multiple" and provide detail below)	Classification (If multiple, choose "other/multiple" and provide detail below)	Alleged Perpetrator's (AP) Names	AP's Relationship to Child	No. of Previous SIU Referrals	County of Incident
1.		If Other/Multiple:	If Other/Multiple:				
2.		If Other/Multiple:	If Other/Multiple:				

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3.		If Other/Multiple:	If Other/Multiple:				
4.		If Other/Multiple:	If Other/Multiple:				
5.		If Other/Multiple:	If Other/Multiple:				
6.		If Other/Multiple:	If Other/Multiple:				

Details of Allegation (The following information is taken verbatim from the referral made to the child abuse hotline.):

Identified Placement:

Suspended Admissions: ☐ Yes ☐ No

Support for Classification Decision:

This case was debriefed with: _____ from _____
Name Agency/DCS

on _____
Date

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Check if Unsubstantiated Case with Unresolved Issues and/or Concerns Related to Safety or Well-being: *(Check all that apply)*

<input type="checkbox"/>	Discipline issues (<i>e.g.</i> , corporal punishment, <i>etc.</i>)
<input type="checkbox"/>	Supervision issues (<i>e.g.</i> , use of too young or questionable persons for baby-sitting; independent respite; <i>etc.</i>)
<input type="checkbox"/>	Environmental concerns (<i>e. g.</i> , safety hazards such as pool w/o fence; inadequate sleeping arrangements; lack of cleanliness; hazardous materials around unsupervised youth; <i>etc.</i>)
<input type="checkbox"/>	Child specific issues unrelated to foster parent(s) (<i>e.g.</i> , child needs a higher or different level of treatment; i.e. sex-related therapy, grief counseling, gender identity counseling, <i>etc.</i>)
<input type="checkbox"/>	Placement issues (<i>e.g.</i> , child to facility/resource home is not a “good match”; <i>etc.</i>)
<input type="checkbox"/>	Providing bare minimum nurturing (<i>e.g.</i> , foster children treated inferior to biological children; foster parents don’t appear to be bonded w/ the foster children; <i>etc.</i>)
<input type="checkbox"/>	Inappropriate behavior/comments in setting (<i>e.g.</i> , foster parent(s), agency staff, household members yelling, cursing, being demeaning to children; <i>etc.</i>)
<input type="checkbox"/>	Lack of appropriate care for youth (<i>e.g.</i> , children are physically unclean; clothed improperly; not fed adequately; <i>etc.</i>)
<input type="checkbox"/>	Medication issues (<i>e.g.</i> , incorrect medication administration; missing appointments; <i>etc.</i>)
<input type="checkbox"/>	Unaddressed truancy
<input type="checkbox"/>	Poor/limited cooperation of foster parent(s) or agency with SIU
<input type="checkbox"/>	Non-compliance with DCS personnel policies (<i>e.g.</i> , lack of appropriate or timely background/fingerprint checks for employees; people living in resource home who are not approved as household members; <i>etc.</i>)
<input type="checkbox"/>	Milieu issues (<i>e.g.</i> , environment in the congregate care setting is not therapeutic; <i>etc.</i>)
<input type="checkbox"/>	Other:

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Details of Concerns:

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Contact Person: _____

Notification E-mailed to:

, Foster Home Quality (FHQT), EI DCS Quality Control SIU	, Deputy Commissioner of Child Safety
, Provider Quality (PQT), EI DCS Prov Qual SIU	, Executive Director of Child Safety
, Regional Director/CPS Director	, Director for SIU
, Family Service Worker	, SIU TC
, Family Service Worker's TL	, SIU TL
, Director of FHQT/PQT	, SIU
, Director of DCS Licensing	, Director of Foster Care and Adoption
, DCS Resource TC	, DCS Juvenile Justice Division
, YDC Superintendent	, Monitor's Office
, Assistant Commissioner	, Facilities & YDC (PREA)
, Executive Director of Network Development	, Executive Director
, Other	

According to DCS SIU Policy [14.10 Special Investigations Unit Child Protective Services Investigations](#), **Section B, 4:** Family Service Workers are responsible for notifying the biological parents of a foster child during a SIU investigation.

According to Special Investigations Unit Protocol. This is an internal document and is not disseminated outside of DCS.

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