



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

Case # 2014.006

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	1/7/14	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	1/7/14		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	Black or African American	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:			
If child is in DCS custody, list placement type and name:	NA					

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

██████████ 5 months old, lives with his parents, ██████████ and ██████████ and maternal grandmother ██████████. There are no other children in the home. ██████████ has medical issues from birth and has a trachea and feeding tube as well as a home health nurse on a nightly basis.

On 1/7/14, at approximately 4:30 AM, the home health nurse called for the mother and said something was wrong with ██████████. After failed efforts to get a reading on his vitals by the parents, CPR was administered by the father and an ambulance was called. Reportedly the nurse was "panicking" so the parents called 911. ██████████ was transported to ██████████ Medical Center and pronounced deceased at 5:55 AM.

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:

1-7-14 CPSI ██████████ observed the interview with Detective ██████████ and the mother, ██████████. The mother stated that she took ██████████ to the doctor's office on 12/31/14 and everything was okay. Due to a discrepancy in the readings of the monitor at home and the readings at the hospital, ██████████ was hospitalized for 24 hour observation. The mother wanted to change home health nurses, so they kept ██████████ until 1-2-14 to address this issue. The mother was instructed to administer oxygen if ██████████ stats were too low at home. The mother stated that Nurse ██████████ came to the home on Thursday and Friday, Nurse ██████████ came on Saturday and Nurse ██████████ came back on Sunday (nights only 8 AM-8 PM). The mother reported that yesterday 1-6-14 ██████████ went to the doctor to get his shots and everything was fine. The mother stated that he was a little fussy last night because of the shots. Nurse ██████████ (a floater) arrived at 8:00 PM and mom showed her how to use the suction machine and told her about his distress signs. The mother stated that ██████████ is on a NOS from 9 AM- 8 PM and wears a trachea collar from 8 PM- 9 AM. She checked on him at 11:00 PM and approximately 1:00 AM and he was fine both times. At 4:30 AM, the nurse yelled that something was wrong with ██████████. The mother reported that she suctioned him manually then with the deep suction machine and a little mucus came out. She stated that she then woke up the father and they noticed that the trachea collar was loose, so they tightened it and called the ambulance. The mother stated that the nurse told her ██████████ had been "like that" for twenty minutes, but she didn't know what she meant since the nurse wasn't specific. The mother stated that they have everything needed in case of an emergency, so they got the emergency bag and tried the AMBO. The mother stated that the nurse acted like she didn't know what to do. The parents administered CPR.

1-7-14 CPSI ██████████ observed the interview of the father, ██████████ and the detectives. The father stated that he and the mother were both asleep and the nurse woke them up and said something didn't look right with ██████████. The father reported that the nurse said ██████████ looked grey and he had been like that for 20 minutes. The father reported that the nurse didn't have a phone, there was blood in the trachea, so he administered CPR. He said that he tried to calm mom down. He kept doing CPR and told the nurse to call 911, the nurse left room and came back twice. The father stated that the nurse did not call 911; she said that she was going to lose her job. The father reported that he rode to the hospital

with the nurse because the mother rode in the ambulance. He said that when they reached the hospital, the nurse refused to come inside and left.

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

Child was deceased when DCS arrived at the hospital.

Describe disposition of body (Death):

Name of Medical Examiner/Coroner: [REDACTED] Was autopsy requested? No Yes

Did CPS open an investigation on this Death/Near Death? No Yes

Was there DCS involvement at the time of Death/Near Death? No Yes

Type: [REDACTED] Case #: [REDACTED]

Describe law enforcement or court involvement, if applicable:

When CPSI [REDACTED] [REDACTED] arrived, Detectives [REDACTED] [REDACTED] and [REDACTED] [REDACTED] were present along with a representative from the Medical Examiner's office.

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):

No other siblings or children involved.

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
/ /					
/ /					
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/ /					
/ /					
/ /					

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: [REDACTED]	Telephone Number: [REDACTED]
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: [REDACTED]

Intake #:

[REDACTED]

Investigation #:

[REDACTED]

Date of Referral:

Case # 2014.006

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: 01/07/2014 11:50 AM CT
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 01/07/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 01/07/2014 01:29 PM
 First Team Leader Assigned: [REDACTED] Date/Time 01/07/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 01/07/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr	Neglect Death	Yes	Unknown Participant [REDACTED], Unknown	None

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
 Referent Address: [REDACTED]
 Referent Phone Number: [REDACTED]
 Type of Contact: I-3 Phone
 Notification: None
 Narrative: This child is not in custody
 TFACTS: Yes
 NOTE: No history was found for [REDACTED] due to the common spelling and no DOB provided.
 Family Case IDs: [REDACTED] (for [REDACTED] as a child) and [REDACTED] (blank case, DOB listed for [REDACTED] on this case as [REDACTED])
 Open Court Custody/FSS/FCIP No
 Closed Court Custody Yes, 9-3-98 to 11-2-01 - Case # [REDACTED]
 Open CPS - No

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

Substantiated No

Death No

Screened out No

History (not listed above): Yes:

8/19/2004 - [REDACTED] - PHA and SRP - Allegation Unsubstantiated/ Perpetrator Unsubstantiated

County: [REDACTED]

Notification: None

School/ Daycare: None

Native American Descent: No

Directions: None Given

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

Reporter states: [REDACTED] [REDACTED] (5 months) lives with his mother [REDACTED] [REDACTED] birth father [REDACTED] [REDACTED] and maternal grandmother [REDACTED] [REDACTED]. There are no other children in the home.

[REDACTED] does have medical issues. He has a tracheotomy and also a feeding tube. He was born prematurely, but at this time, all of [REDACTED] medical issues are not known. He does have a home health nurse (persons information unknown, company unknown) with him at his home from 9:00 pm until 9:00 am on a nightly basis.

[REDACTED] last saw [REDACTED] at 1:30 am on January 7, 2014 and he appeared to be fine. He was in his swing in the living room. The living room has been transformed into [REDACTED] room due to all of his medical equipment and the assistance of the home health nurse (unknown name).

At approximately 4:30 am on January 7, 2014, the home health nurse called for [REDACTED] and said something was wrong with [REDACTED]. It is unknown if the home health nurse found him in his swing or somewhere else in the living room.

It is unknown what time Emergency Medical Services (EMS) was contacted or who contacted them. [REDACTED] was transported to [REDACTED] Medical Center at an unknown time on January 7, 2014. [REDACTED] was pronounced deceased at 5:55 am on January 7, 2014 at the hospital.

[REDACTED] had no obvious external trauma. It is unknown if his medical issues played a part in his death. [REDACTED] autopsy will be performed on January 8, 2014. The parents and grandparent have been interviewed about the situation. The home health nurse has not been interviewed. The Department of Children's Services Case Manager, [REDACTED] [REDACTED] has already responded to this case and was present for the interviews with the family members. At this time, no arrests or citations have been made or given out. The parents had no explanation for [REDACTED] death.

[REDACTED] was frequently at the hospital/medical facilities (since birth) until the past week. It is unknown if the parents, grandparent, or home health nurse have a history with the police or the Department of Children's Services.

The conditions of the home are not of concern (per reporter). The home was seen on January 7, 2014. The home had not been seen prior to today. The reporter has never had contact with the family prior to today.

SSMS: [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] and [REDACTED] [REDACTED] negative

County group emailed.

Per SDM: Investigative Track, P1, Child Death. [REDACTED] TL on 1-7-14 @ 12:46 pm



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

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



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 30 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 29 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Partipant ID: [REDACTED]

SSN: [REDACTED] Race: Black/African Age: 1 Yr

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

Date of Birth:

Partipant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: [REDACTED]

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: Unknown Participant [REDACTED], Unknown

Gender: Female

Date of Birth:

Partipant 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:

Date of Birth:

Partipant 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: 01/07/2014

Assignment Date: 01/07/2014

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	Unk, Participant [REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 03/07/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Closed as Allegation Unsubstantiated Perpetrator Unsubstantiated.

D. Case Workers

Case Worker: [REDACTED]

Date: 03/07/2014

Team Leader: [REDACTED]

Date: 03/07/2014

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:

The child was deceased at the time of the referral. The CPS investigator observed the child initially. At the time SI received the case the child's body was being prepped for autopsy.

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

SI is noting that Dr. [REDACTED] reported that the toxicology tests were negative and in her opinion no one did anything bad to [REDACTED] the nurse didnt give him oxygen but the death was natural and she cannot ensure that giving the child oxygen would have saved his life. Dr. [REDACTED] reported that they dont usually bring children in with congenital heart disease for autopsies unless there is some suspicion, the child shouldnt have come to their office, and he came because the hospitals refused to sign off on the death certificate.

SI [REDACTED] spoke to Detective [REDACTED] at the Medical Examiners Office on this date. Detective [REDACTED] informed SI that they went and talked to the nurse at her home in [REDACTED] and the nurses story is different from the parents story. Detective [REDACTED] reported that the nurse told her that she didnt want to move the child from his swing and that the dad was not doing the chest compressions deep enough when he was giving the child CPR. Detective [REDACTED] said that there will not be any criminal charges filed against the nurse, Ms. [REDACTED]



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

Case Name : ██████████ ██████████

Investigation ID: ██████████

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

The alleged perpetrator remains unknown.

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

CM observed that during the interview with Det. ██████████ Ms. ██████████ ██████████ stated that: ██████████ went to the doctors office on 12/31/14 and everything was ok but there was a discrepancy in the readings of the monitor at home and there so he was hospitalized for 24 hr. observation. Mom wanted to change nurses so he stayed there until the 2nd of January since the nurses station was closed. She was instructed to administer oxygen if ██████████ stats went too low at home. She stated that Nurse ██████████ came to the home on Thursday and Friday, Nurse ██████████ came on Saturday and Nurse ██████████ came back on Sunday (nights only 8 AM-8 PM). Yesterday ██████████ went to get his shots; everything was fine then and last night except he was a little fussy because of the shots. Nurse ██████████ (a floater) arrived at 8 PM and mom showed her how to use the suction machines and told her his distress signs to look for. ██████████ is on a NOS from 9 AM-8 PM and wears a trachea collar from 8 PM- 9 AM. She checked on him at 11 PM and about 1 AM and he was fine. At 4:30 AM, the nurse yelled for her stating that something was wrong with ██████████ and mom suctioned him manually then with the deep suction machine- a little mucus came out. She stated that she woke up dad (since he was better at that than she was); they noticed the trachea collar was loose so they tightened it, and they called the ambulance because nothing was changing. The nurse stated told her ██████████ had been like that for twenty minutes but she didnt know what she meant since the nurse wasnt specific. Mom observed that he was listless. They had everything ██████████ needed in case of an emergency right there. They got the emergency bag and tried the AMBO while the nurse acted like she didnt know what to do. They started administering CPR since the machine wasnt picking up any signal from any position on ██████████ body. When the ambulance arrived, they assured her she did everything right and they would take over. She rode to the hospital in the ambulance. She gave the detective very detailed medical and feeding information. She stated that she , dad, her sister, and the grandmother all received care training before the baby came home and she trained even more since she was at the hospital. CM observed that she was extremely knowledgeable about the babys care, the equipment, the medical terminology, etc. At one point mom picked ██████████ up to demonstrate and she was still very gentle with him and positioned her hands in the correct safety positions even though he was deceased. Ms. ██████████ said that about 4 am he started gurgling so she did a straight suction and didnt get much, she did it slow and gently to make sure she didnt go too far and about 25 minutes into it she realized she was getting a little of the congestion but still heard the gurgling sound so she did a deep suction. Ms. ██████████ stated that the MAR tells how far the deep suction tube is supposed to go, which is 7 cm, and its a

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

DCS policy defines Child Death/Near Death as any unexplained death of a child when the cause of death is unknown or pending an autopsy report. Any child death caused by abuse resulting from direct action of the childs caretaker or the consequence of the childs caretakers failure to stop another persons direct action that resulted in the death of a child. Child fatalities are always treated as severe child abuse. Any child death that is the result of the caretakers failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.

SI ██████████ is closing and classifying the allegation of Neglect Death towards alleged victim ██████████ ██████████ against Unknown alleged perpetrator as Allegation Unsubstantiated Perpetrator Unsubstantiated. The alleged victim ██████████ was pronounced deceased on 1/7/14 at 5:54 AM after he was found unresponsive at the home by the home health nurse. The parents and the home health nurse attempted to resuscitate the child and perform CPR until EMS arrived. Preliminary meeting with the medical examiner determined that the child died of natural causes related to his heart disease and ongoing medical condition. The alleged perpetrator



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]

remains unknown due to the manner of death being listed as natural. The autopsy report states that the manner of death was Natural and the cause of death were due to complications of subglottic stenosis due to patent arteriosus requiring operative intervention due to prematurity (26 6/7 weeks gestation) due to preterm labor. A copy of the autopsy report is located in the case file and in document section of the investigation. There is no evidence to support the allegation of Neglect Death in accordance with DCS policy.

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] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/14/2014

Contact Method:

Contact Time: 05:25 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location:

Created Date: 04/14/2014

Completed date: 04/14/2014

Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/14/2014 06:55 PM Entered By: [REDACTED] [REDACTED]

This case was read and approved for closure by Director [REDACTED] The case is being closed off TFACTS by LI [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/11/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/11/2014

Completed date: 04/11/2014

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: 04/11/2014 11:57 AM Entered By: [REDACTED]

SI is noting that a copy of the [REDACTED] has been placed in the case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/11/2014

Contact Method:

Contact Time: 11:55 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/11/2014

Completed date: 04/11/2014

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: 04/11/2014 11:57 AM Entered By: [REDACTED]

DCS policy defines Child Death/Near Death as any unexplained death of a child when the cause of death is unknown or pending an autopsy report. Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child fatalities are always treated as severe child abuse. Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.

SI [REDACTED] is closing and classifying the allegation of Neglect Death towards alleged victim [REDACTED] [REDACTED] against Unknown alleged perpetrator as Allegation Unsubstantiated Perpetrator Unsubstantiated. The alleged victim [REDACTED] [REDACTED] was pronounced deceased on 1/7/14 at 5:54 AM after he was found unresponsive at the family's home by the home health nurse. The parents and the home health nurse attempted to resuscitate the child and perform CPR until EMS arrived. Preliminary meeting with the medical examiner determined that the child died of natural causes related to his heart disease and ongoing medical condition. The alleged perpetrator remains unknown due to the manner of death being listed as natural. The autopsy report states that the manner of death was Natural and the cause of death were due to complications of subglottic stenosis due to patent arteriosus requiring operative intervention due to prematurity (26 6/7 weeks gestation) due to preterm labor. There is no evidence to support the allegation of Neglect Death in accordance with DCS policy.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/11/2014

Contact Method:

Contact Time: 11:10 AM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/11/2014

Completed date: 04/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/11/2014 11:48 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that SI received Autopsy Report for [REDACTED] [REDACTED] completed by [REDACTED] County Office of Medical Examiner on this date. SI reviewed the autopsy report. Autopsy report indicates that the manner of death was Natural and the cause of death were due to complications of subglottic stenosis due to patent arteriosus requiring operative intervention due to prematurity (26 6/7 weeks gestation) due to preterm labor. A copy of the autopsy report is located in the case file and in document section of the investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/28/2014

Contact Method:

Contact Time: 09:20 AM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/28/2014

Completed date: 03/28/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/28/2014 10:22 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that SI sent email to [REDACTED] [REDACTED] on this date requesting the final autopsy for [REDACTED] [REDACTED] SI was informed that the autopsy report is not ready at this time.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/13/2014

Contact Method:

Contact Time: 02:10 PM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/14/2014

Completed date: 03/14/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/14/2014 11:23 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that SI requested the autopsy report from DCS regional nurse, [REDACTED] [REDACTED] on this date.



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

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

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	03/13/2014	Contact Method:	Face To Face
Contact Time:	12:30 PM	Contact Duration:	Less than 15
Entered By:	██████████ ██████████	Recorded For:	
Location:	Other Community Site	Created Date:	03/14/2014
Completed date:	03/14/2014	Completed By:	██████████ ██████████
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: 03/14/2014 11:21 AM Entered By: ██████████ ██████████

SI ██████████ is noting that the case was presented to ██████████ County CPIT on this date. It was agreed to classify the allegation of Neglect Death against Unknown alleged perpetrator as Allegation Unsubstantiated Perpetrator Unsubstantiated due to the medical examiner reporting that the child's death was natural and due to medical conditions.

SI ██████████ is noting that the case will remain open until the official autopsy report is received and reviewed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/10/2014

Contact Method: Phone Call

Contact Time: 10:20 AM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/14/2014

Completed date: 03/14/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Detective [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/14/2014 11:19 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] spoke to Detective [REDACTED] on this date. Detective [REDACTED] informed SI that the police do not present death cases at CPIT. Detective [REDACTED] said that she does not like the home health nurse because the nurse never administered CPR or oxygen to the child and did not do render any medical attention. Detective [REDACTED] said that the nurse reported that the father was not doing CPR deep enough but said that she did not want to tell the father that. Detective [REDACTED] stated that she has concerns that the nurse wrote all of her notes after the incident occurred and she is checking into if the machine malfunctioned as the nurse reported. Detective [REDACTED] stated that she hasnt completed a full interview with the nurse, they may not have a murder charge for the nurse but she is looking at possible neglect charges because the nurse did not do any medical procedures. Detective [REDACTED] stated that she asked the nurse why she didnt administer oxygen and the nurse said that she didnt remember the oxygen machine being there and said that the baby needed deep suctioning and the mother had to administer the oxygen. Detective [REDACTED] stated that she feels that the nurse probably went to sleep and woke up when the machine was going off. SI explained to Detective [REDACTED] that after staffing the case with LI and IC, SIU did not have enough evidence to substantiate the allegations of Neglect Death against the nurse. SI thanked Detective [REDACTED] for her time.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/07/2014

Contact Method:

Contact Time: 02:10 PM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/07/2014

Completed date: 03/07/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/07/2014 02:10 PM Entered By: [REDACTED] [REDACTED]

SI is noting that the case is scheduled for CPIT on 3/13/14.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/28/2014

Contact Method: Face To Face

Contact Time: 04:10 PM

Contact Duration: Less than 45

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/11/2014 01:51 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] spoke to [REDACTED] [REDACTED] home health nurse, on this date. SI asked Ms. [REDACTED] about the working with the [REDACTED] family. Ms. [REDACTED] stated that she is a LPN and she has worked for the company since 12/31/13, she worked with the family from 8 pm to 8 am, and she has been a nurse since 2010. Ms. [REDACTED] said that this was her first case with this company and she worked with the baby 3 times. Ms. [REDACTED] said that her responsibilities were to suction him, change diapers, do tube feedings and keep an eye on his O2 stats to observe how much oxygen he was getting. Ms. [REDACTED] said that he had a machine hooked to the bottom of his foot and the numbers read on the machine and it also keeps track of his heart rate; the machine is called a pulse oximeter. Ms. [REDACTED] said that they had the babys 485-his plan of care, it comes with a notebook with his diagnosis. Ms. [REDACTED] said that the parents let her know what to do and where things were. Ms. [REDACTED] said that she has done suction before, she knows how to do it, but the parents showed her how far down to go and the parents did it the first suction but the paper also says how far to go. SI asked Ms. [REDACTED] if they are trained for suction, deep suction and tracheas. Ms. [REDACTED] stated that she has had to do deep suction before and they do have a class for suctioning and catheterization through the hiring process, its a class thats termed orientation. Ms. [REDACTED] said that they learn that in school during their clinicals also. Ms. [REDACTED] stated that she didnt have any problems or issues with the baby and she was shocked when she heard what happened. Ms. [REDACTED] said that the RN came by on her first night because it was the babys first night at home. Ms. [REDACTED] said that if O2 dropped to a certain level then oxygen is supposed to be given. Ms. [REDACTED] said that sometimes his O2 stats would drop when he fussed because he couldnt get air but she never had to use the oxygen because his stats were always good; the stats should be between 95-100% and the mother said if it dropped into the 60s and didnt come back then use oxygen. Ms. [REDACTED] said that there was an oxygen tank but it wasnt there the first 2 nights she worked, she thinks it was dropped off the 3rd night and she thinks the mother said she had to use it once. SI thanked Ms. [REDACTED] for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/28/2014

Contact Method:

Contact Time: 03:45 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/11/2014 02:10 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] staffed the case with LI [REDACTED] and IC on this date. It was agreed that the alleged perpetrator for Neglect Death would remain as Unknown. SI was informed to find out about the agency's training on suction and tracheas and if the nurses are properly trained and skilled for certain type of patients. SI informed LI [REDACTED] and IC [REDACTED] of a conversation during the Child Death Review Team meetings of concerns that home health nurses are LPNs and not RNS, therefore they are not as skilled as RN nurses. SI is noting that during the CDRT meeting several people, including DCS regional nurse and foster parent advocate reported working with home health nurses stating that they have had to train the nurses on doing certain things such as tracheas, g-tubes and suction.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/28/2014

Contact Method:

Contact Time: 01:55 PM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/14/2014

Completed date: 04/14/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/14/2014 11:51 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] received the nursing notes from [REDACTED] for [REDACTED] [REDACTED] on this date. SI reviewed the nursing notes. There were no concerns or issues documented by the nurses caring for the child in the nursing notes. SI is noting that [REDACTED] [REDACTED] nursing notes on 1/6/14 reflect identical statements she provided to SI during her interview. SI is noting that a copy of the medical records will be located in the case file and in the document section of the investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/28/2014

Contact Method: Phone Call

Contact Time: 12:15 PM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/11/2014 12:45 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] spoke to [REDACTED] home health nurse on this date. SI asked Ms. [REDACTED] about the working with the [REDACTED] family. Ms. [REDACTED] said that she worked with the baby 1 time and everything went good while she was at the home, she worked 1 night shift from 7pm to 7 am, she thinks. Ms. [REDACTED] said that while caring for the baby she had to suction his trachea and change his diaper. Ms. [REDACTED] stated that she asked the parents to show her how to care for him, the mother did the feedings and gave him his medication through his g-tube, she gave him 1 nighttime feeding and just made sure he was clean and dry. SI asked Ms. [REDACTED] where the baby slept while she was there. Ms. [REDACTED] said that he slept in his rocking chair or in his baby bed. Ms. [REDACTED] said that the parents explained that he was in the hospital for 5 months and had just came home, he was out of the hospital for 2-3 days when she got there, she thinks she went on a Saturday night. SI thanked Ms. [REDACTED] for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/28/2014

Contact Method:

Contact Time: 10:55 AM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/11/2014 01:21 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that SI sent fax requesting nursing notes regarding the care of [REDACTED] [REDACTED] from [REDACTED] [REDACTED] on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/26/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/14/2014

Completed date: 04/14/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/14/2014 11:09 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] checked the DCS history on the alleged victim. There was no CPS or SIU history found on the family.

SI [REDACTED] is noting that the alleged perpetrator is listed as unknown. SI is noting that SI checked the DCS history on the home health nurse [REDACTED] [REDACTED]. There was no CPS or SIU history found on Ms. [REDACTED].



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED] Case Name: [REDACTED] [REDACTED]
 Case Status: Close Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/26/2014 Contact Method: Face To Face
 Contact Time: 10:00 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 03/11/2014
 Completed date: 03/11/2014 Completed By: [REDACTED] [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/11/2014 12:37 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] spoke to the home health nurse and possible alleged perpetrator, [REDACTED] [REDACTED] on this date. SI discussed the case on [REDACTED] [REDACTED]. Ms. [REDACTED] stated that she is a LPN, Licensed Practical Nurse, since 7/20/12, and she has been with Home Health Care since July 2013, she started working in a nursing home with elderly people but they were doing quantity health care, not quality, so she has found her niche. Ms. [REDACTED] said that she is the on call floater for the company if someone calls in sick, on vacation, on leave or just doesnt show up. Ms. [REDACTED] said that she got a new client in [REDACTED] on a 5 month old baby; she was provided all the information but nothing was told about the babys medical issues to her until she got to the home and spoke to the mother. Ms. [REDACTED] said that her heart goes out to the mother because she cant imagine what she is going through. Ms. [REDACTED] stated that she worked at the home on 1/6/14, she got to the home between 7-8 PM and she was scheduled to work either an either 8 or 12 hour shift, she cant recall off hand; she pulled up and the parents were standing in the yard smoking cigarettes and she went inside the house and no one was inside with the baby. Ms. [REDACTED] stated that the mother threw her cigarette and came in the house behind her and gave her an orientation for information about the baby, his current condition, and showed her where all of his supplies were. Ms. [REDACTED] said that she found out that the baby was born in June, he was tiny, he had a trachea and he was some months premature and that he had only been home for 2 days because he was in the hospital since he was born. Ms. [REDACTED] stated that she was responsible for providing deep or straight suction, keeping his airways clear, feeding him and changing him while she was at the home. Ms. [REDACTED] stated that she heard the baby have some congestion and she told the mother she was going to deep suction and had the mother stand there to make sure she did it correctly and it had a good result. Ms. [REDACTED] said that she mentioned a few things to the mother and the mother told her it was normal; such as the baby rolling his head around a lot and moving his arms around a lot; she was afraid he would knock out his trachea but the mother said it was normal.

Ms. [REDACTED] said that one thing concerned her because the baby was hooked up to a pulse oximeter (PO), which measures the amount of oxygen to the blood and the heart beat; a good PO would range between 93-100% and anything below that is concerning. Ms. [REDACTED] stated that the babys PO was at 89% and she told the mother that she didnt like that it was reading low and the mother told her not to worry about it and said that [REDACTED] told her that it was off by 5 points and adding 5 points to the reading would be the correct reading. Ms. [REDACTED] said that she asked the mother if the 5 point rule applies to the heart rate and the mother told her no, that the heart rate reading was accurate. Ms. [REDACTED] stated that she changed the baby, suctioned him if he was congested; she was there to ensure that his airways were clear and he was fed through the night. Ms. [REDACTED] stated that the baby was fed through a mickey



Tennessee Department of Children's Services

Case Recording Summary

Case Id: ██████████

Case Name: ██████████ ██████████

Case Status: Close

Organization: ██████████ Region

button, the formula goes through a tube to feed him and everything was fine. Ms. ██████ stated that they went by the MAR, which is the doctors medical record on how to care for the child, how much medication he was to be given and how often, is what they follow when caring for people. Ms. ██████ said that the father went in and out of the home several times, which was weird to her, a few times she thought he was smoking a cigarette and other times he would be gone for longer periods, the mother stepped outside a few times to smoke but she was gone for a normal amount of time. Ms. ██████ stated that they have to take notes and write everything down, so she had to explain to the parents why she was writing things down. Ms. ██████ said that she thinks the parents went to sleep around midnight and she was sitting on the couch and the baby was next to her in the swing chair, that didnt work, but she liked that he was sitting up while getting his feedings because he should be at a 45 degree angle when getting feedings. Ms. ██████ said that she is like respite to allow the parents to sleep. Ms. ██████ said that if the child isnt fed on an angle he could reflux and regurgitate, if he aspirates that he could die and the mother didnt know that while she was feeding him. Ms. ██████ said that he was a precious baby and she played with him; he was normal with responding to things but he never moved from the waist down. Ms. ██████ said that about 4 am he started gurgling so she did a straight suction and didnt get much, she did it slow and gently to make sure she didnt go too far and about 25 minutes into it she realized she was getting a little of the congestion but still heard the gurgling sound so she did a deep suction. Ms. ██████ stated that the MAR tells how far the deep suction tube is supposed to go, which is 7 cm, and its a tiny flexible tube. Ms. ██████ stated that she got the deep suction tube down and got a little but not the she wanted so she got the mother up to do the deep suction and the mother did something but wasnt able to get rid of what was causing him to gurgle.

SI asked Ms. ██████ if she had fell asleep before hearing the baby gurgle. Ms. ██████ said that she did not fall asleep, she was watching TV and reading a book and the baby was next to her in his swing. Ms. ██████ said that the dad came in the room and she got her stethoscope to listen to his lungs and she didnt hear any air in his lungs so she listened to his heart and she didnt hear anything. Ms. ██████ said that she told the parents she didnt hear heartbeat, so she palpitated the corroded (neck), she didnt hear anything so she palpitated radial (wrist), still nothing and got a flutter from behind his left knee. Ms. ██████ stated that she asked the mother if she had her phone in her pocket because her phone was across the room in her bag, the mothers phone was in her pocket so she told the mother to call 911. Ms. ██████ said that the mother was hysterical and was trying to talk to the operator and mom mentioned that they werent going to send an ambulance so she got on the phone to tell them everything that was going on, that he had no pulse sounds or no breathing and they sent the ambulance. Ms. ██████ stated that while she was on the phone with 911 the dad started doing CPR while the child was in the swing and he did it correctly, she asked the dad if she could take over and he said no. Ms. ██████ said that dad started CPR while the baby was in the crib then they moved the baby to the changing table. Ms. ██████ said that the ambulance got there pretty quick and took over the CPR then after a few minutes they transferred the baby to the ambulance. Ms. ██████ stated that it seemed like forever that the EMT did CPR on the baby but it was about 10-15 minutes because they were trying to establish a rhythm.

Ms. ██████ said that the EMT told them that only 1 person could ride in the ambulance, the mother rode in the ambulance, she realized they didnt have a car and she asked the dad if there was anyone he could call, he said no. Ms. ██████ said that it is against their companys policy to transport anyone in their personal vehicles because of insurance coverage; if she has a client that has a doctors appointment she either follows the family or rides with them, they do not transport clients in their cars. Ms. ██████ said that she did make the comment that she could lose her job if she drove the dad to the hospital but she felt bad saying that given the circumstances and she told the dad to get in her truck. Ms. ██████ said that the only conversation she had with the dad on the way to the hospital was that the dad was complaining that she was driving to slow and kept telling her to drive faster. Ms. ██████ said that when they pulled up at the hospital the dad jumped out before she actually stopped and then she pulled over and parked in a spot. Ms. ██████ stated that in this type of situation they are supposed to wait until the patient is admitted to the hospital, do the notes and then the shift would end and they can leave. Ms. ██████ said that one of the EMTs came out and told her that the child was afib ablation, which means his heart was quivering and not pumping and told her that the baby had been in afib ablation since they brought him out of the home and they couldnt get a rhythm. Ms. ██████ said that she asked the EMT if the doctor wanted to talk to her and the EMT told her she would go find the doctor. Ms. ██████ stated that about 5 minutes later the EMT came back outside and told her that things werent going well, the dad was upset and yelling that his baby was fine when they went to sleep and that it was the nurses fault. Ms. ██████ said that the EMT told her that she should leave, so she called the agency office to tell them of the situation, and she was patched into the RN on call and told her what was going on. Ms. ██████ stated that the on call RN, she thinks her name was ██████ but she doesnt recall, told her that her being there would make things worse because the dad was looking for someone to blame and told her to leave and she left. Ms. ██████ said that the dad didnt ask her to come



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████ ██████████

Case Status: Close

Organization: ██████████ Region

into the hospital or anything, he only told her to drive faster and jumped out without saying anything.

Ms. ██████ stated that her supervisor is ██████ she called ██████ to tell her what was going on and she told her they would be in touch with her. Ms. ██████ said that it was an open ended investigation and she was taken off case and had to submit all paperwork that had to do with the case. Ms. ██████ said that the next day 2 detectives from ██████ ██████ in ██████ showed up on her porch in ██████ and she talked to them. Ms. ██████ said that its very hard to lose a patient but to lose a baby is awful. SI asked Ms. ██████ about making the comment of her losing her job. Ms. ██████ stated that she only mentioned that she could lose her job when the dad asked to ride him to the hospital and she explained that its a rule because he wasnt covered under her insurance and told him that she could lose her job. Ms. ██████ said that she felt bad, cold and ashamed by telling him that so she told him to get in her truck and said the heck with losing her job. Ms. ██████ stated that she has taken care of people with tracheas and g-tubes, this wasnt her first time working with infants but this was the first time that something like this has ever happened where a patients health turns for the worst. Ms. ██████ said that she has also never seen a PO that was off by 5 points. SI asked Ms. ██████ if she went outside to smoke while she was at the home. Ms. ██████ said that she does smoke cigarettes, she had 1 cigarette in her truck before the parents went to bed around 10 PM and she asked the parents for permission to go outside to smoke and they were ok with it. Ms. ██████ said that she normally doesnt smoke on the job; she can go 12 hours without a cigarette. SI asked Ms. ██████ about the trachea collar being loose. Ms. ██████ denied that the collar or the trachea was lose and said that the baby would constantly move his head back and forth, she thought maybe he did that because the trachea was too loose or too tight but the mother said it was fine and she also checked it and it was pretty firm. Ms. ██████ said that she checked the collar a few times and everything was hooked up like it should be. SI asked Ms. ██████ about the oxygen machine. Ms. ██████ said that the oxygen concentrator delivers oxygen and it was in the corner of the room, the mother told her that they had just delivered it and she cant remember if the mother said that it was delivered without the tubing or not. SI asked Ms. ██████ why she didnt administer oxygen to the child. Ms. ██████ said that she immediately went to calling 911 and beginning CPR, she wasnt thinking about the oxygen, she was trying to get him to have a pulse. Ms. ██████ said that she doesnt think that the mother knew how to use the oxygen because when the mother told her and showed her everything she didnt talk to her about the oxygen. SI ██████ explained the investigative process to Ms. ██████ and thanked her for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/21/2014

Contact Method:

Contact Time: 11:55 AM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/14/2014

Completed date: 03/14/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/14/2014 11:23 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that SI requested the autopsy report for [REDACTED] [REDACTED] from DCS regional nurse, [REDACTED] on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/19/2014

Contact Method:

Contact Time: 12:02 PM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location:

Created Date: 02/19/2014

Completed date: 02/19/2014

Completed By: [REDACTED] [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: 02/19/2014 12:05 PM Entered By: [REDACTED] [REDACTED]

LI [REDACTED] and SI [REDACTED] staff this case. There is one AP left to talk with. SI has asked for the interview from law enforcement but has not been given them. SI will complete her own interview within the next few weeks. Medical records are still being collected. SI has talked with the ME about preliminary findings but the official report has not been received. SI will email Ms. [REDACTED] for assistance with the M.E. report.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/19/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 02/28/2014

Completed date: 02/28/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/28/2014 04:33 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] called [REDACTED] home health nurse who was present when the child passed, on this date. Ms. [REDACTED] informed SI that she was a floater for the agency and she is always on call. SI arranged to meet Ms. [REDACTED] on 2/26/14.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/19/2014 Contact Method:
 Contact Time: 11:40 AM Contact Duration: Less than 45
 Entered By: [REDACTED] [REDACTED] Recorded For:
 Location: DCS Office Created Date: 04/14/2014
 Completed date: 04/14/2014 Completed By: [REDACTED] [REDACTED]
 Purpose(s): Service Planning
 Contact Type(s): Notation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/14/2014 11:18 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] received medical records from [REDACTED] [REDACTED] Hospital on this date for [REDACTED] [REDACTED]. SI reviewed the medical records document that the child was born at 26 6/7 weeks, and that the pregnancy was complicated by maternal smoking and preterm labor. The delivery was complicated by vaginal bleeding. SI is noting that the [REDACTED] medical records were prior to the child's date of death. SI is noting that a copy of the medical records will be located in the case file and in the document section of the investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED] [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 02/14/2014	Contact Method:
Contact Time: 12:52 PM	Contact Duration: Less than 30
Entered By: [REDACTED] [REDACTED]	Recorded For:
Location: DCS Office	Created Date: 04/14/2014
Completed date: 04/14/2014	Completed By: [REDACTED] [REDACTED]
Purpose(s): Service Planning	
Contact Type(s): Notation	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 04/14/2014 11:44 AM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] received medical records from [REDACTED] Medical Center on this date for [REDACTED] [REDACTED]. SI reviewed the medical records. Medical records document that the child was found at residence pulseless and cool to touch. CPR was started and the child was transferred to ambulance. Records state that the patient has a home health nurse from 8 pm to 8 am, last night there was reportedly increased secretions from the trach and some congestion. At 4:00-4:30 the apnea monitor and pulse oximeter reportedly alerted and the patient was found unresponsive. EMS was called and upon their arrival he was apneic and in asystole. CPR was started and patient was bagged en route. The primary impression was sudden death and the secondary impression was respiratory arrest. Patient was given continuous CPR except for pulse and rhythm checks. After approximately 1.5 hours of downtime all resuscitative efforts were stopped and the patient expired. SI is noting that a copy of the medical records will be located in the case file and in the document section of the investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED] [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 02/14/2014	Contact Method: Phone Call
Contact Time: 12:35 PM	Contact Duration: Less than 30
Entered By: [REDACTED] [REDACTED]	Recorded For:
Location: DCS Office	Created Date: 02/28/2014
Completed date: 02/28/2014	Completed By: [REDACTED] [REDACTED]
Purpose(s): Service Planning	
Contact Type(s): Collateral Contact	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 02/28/2014 04:31 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] called the nursing supervisor for [REDACTED] [REDACTED] on this date. SI was informed that Ms. [REDACTED] was on leave until the following week. SI spoke to [REDACTED] acting supervisor when Ms. [REDACTED] is not in. SI informed Ms. [REDACTED] that SI was calling regarding the client [REDACTED]. Ms. [REDACTED] stated that she knows that they had a nurse at the home when something happened with the baby and the nurse went to get the parents and they were working on the child and then the ambulance were called. Ms. [REDACTED] said that she has been with the home health agency for 4 years, they have had clients pass away but its not frequent, especially with children. Ms. [REDACTED] said that she and [REDACTED] both talked with [REDACTED] about what happened and [REDACTED] told them that the baby was struggling so she suctioned him, got the parents up and the mother came to work on the baby and then the dad came in and started CPR. Ms. [REDACTED] said that [REDACTED] said that she told the mom to call 911, the mom called but wasnt telling the operator everything correctly so [REDACTED] had to get on the phone to notify the operator of what was going on. SI inquired about nursing notes. Ms. [REDACTED] said that they do keep nursing notes on clients and SI would need a release to get a copy of the notes. SI also requested contact information for the nurses who worked with the child. SI was provided with a fax number for the nursing notes and the contact information for the nurses. SI thanked Ms. [REDACTED] for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/24/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/07/2014

Completed date: 03/07/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/07/2014 01:19 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] completed the Safety and Risk Assessment on this date. There is no risk at this time, the child is deceased. The cause of death is reported as natural and due to the child's medical issues and the alleged perpetrator no longer has contact with the child.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/24/2014 Contact Method: Face To Face
 Contact Time: 08:30 AM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 03/07/2014
 Completed date: 03/07/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/07/2014 02:10 PM Entered By: [REDACTED]

SI [REDACTED] spoke to the mother, [REDACTED] at the familys home on this date. Ms. [REDACTED] said that the nurses sent to her home to take care of her baby shouldve known about g-tubes and trachs and she mainly did everything for her baby while the nurses were here and had to show them what to do. Ms. [REDACTED] stated that [REDACTED] was in the swing next to the couch and when the nurse came that night she asked her to show her how to deep suction. Ms. [REDACTED] stated that there have been 3 nurses at her home working with [REDACTED] Ms. [REDACTED] was here a day, Ms. [REDACTED] was here a few days and the nurse that was here that night told her that she usually worked with older people with trachs and not babies. Ms. [REDACTED] said that the nurse should have already knew how to do suction and trachs and she feels that the agency sent anyone out to watch over her baby. Ms. [REDACTED] said that they had to stay in the hospital for about 2-3 weeks to learn how to take care of her baby. Ms. [REDACTED] said that [REDACTED] was born 7/16/13, her due date wasnt until 10/16/13 and he came home from the hospital on 12/30/13, then he had to go back to the hospital on Tuesday, 12/31/13 and he came back home on Thursday, 1/2/14. Ms. [REDACTED] said that night on Monday, 1/6/14, she did her babys trach collar at 6:30 PM, and she picked him up to hold him around 10:30 PM. Ms. [REDACTED] said that her baby was strong and he had pulled his ventilator off a few times while in the hospital and he would pull his trach out with his tongue or hands so they had to put his arms down so he couldnt pull his trach out. Ms. [REDACTED] said that they use the trach collar at night from 9pm to 9am but the nurse didnt do anything. Ms. [REDACTED] stated that the nurse didnt put oxygen on her baby because the oxygen wasnt plugged up, she just panicked and let her baby die. Ms. [REDACTED] stated that she thinks the company is wrong for sending someone out who didnt know what to do with her baby. Ms. [REDACTED] stated that [REDACTED] got feedings from 9-1, 1-5, 5-7 and he was to be fed during the night and he got medicine in day and night. Ms. [REDACTED] said that she started his feeding at 9pm and she showed all the nurses how to care for her baby; which she had to learn everything about taking care of him before he left the hospital. Ms. [REDACTED] stated that from 8pm to 8am was the nurses responsibility to take care of him and the nurses are there while they sleep and they take care of him during the day. Ms. [REDACTED] said that she went to bed that night around 1 Am and [REDACTED] was fine, his monitor was hooked up and he was sleep, she woke up around 4:30 AM to get a drink and she coughed and thats when the nurse called her to come into the living room. Ms. [REDACTED] said that [REDACTED] slept in his crib or in the swing in the living room because that is where all his equipment was. Ms. [REDACTED] stated that when she went into the living room the nurse said that [REDACTED] had been like that for about 20 minutes, that she was about to suction, and had already used the saline drops to break up any congestion before suctioning. Ms. [REDACTED] stated that they did the pulse monitor and the monitor wasnt picking up anything, his trach was loose and the nurse couldnt get a pulse or heartbeat. Ms. [REDACTED] said that the nurse didnt



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████ ██████████

Case Status: Close

Organization: ██████████ Region

even call 911, she asked her to call. Ms. ██████████ said that her boyfriend started doing CPR and the nurse was walking around panicking. Ms. ██████████ said that the ambulance came in about 15 minutes and they did CPR and let her ride in the ambulance to the hospital but said that the dad couldnt ride. Ms. ██████████ stated that ambulance lady asked the nurse to ride dad to ██████████ hospital, the closest hospital and the nurse said no, that she would lose her job. Ms. ██████████ said that her boyfriend got mad and started cursing the nurse out and then the nurse rode him to the hospital. Ms. ██████████ said that the doctor asked them what happened and someone asked where the nurse was and they were told that she had pulled off; she didnt even come in and give a statement or tell the doctors what happened since she was the one with him at the time and that is what shes supposed to do; she fled the scene. Ms. ██████████ stated that they pronounced him dead at 5:45 AM and the nurse or the agency has not called them to see how they are doing, to say sorry, or to see if they needed anything.

Ms. ██████████ said that ██████████ had a heart murmur and was given medicine to help it close and he also had surgery to close it but he was fine that night and he wasnt sick. Ms. ██████████ stated that she had her baby at ██████████ and they had to transfer him to ██████████ he was on a ventilator and had to have surgery. Ms. ██████████ said that when the doctors told her he needed a trach she was scared and she went off but she agreed to it because they explained that he needed it. Ms. ██████████ said that she was told that when the swelling went down they would be able to take his trach out in a few years because his insides were swelling and he would have had to go to the doctor every 6 months. SI explained the investigative process to Ms. ██████████ SI provided Ms. ██████████ with counseling resources to contact for services. SI gave Ms. ██████████ SIs condolences and thanked her for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/17/2014 Contact Method: Face To Face
 Contact Time: 09:30 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 02/28/2014
 Completed date: 02/28/2014 Completed By: [REDACTED] [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Detective [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/28/2014 03:13 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] spoke to Detective [REDACTED] at the Medical Examiners Office on this date. Detective [REDACTED] informed SI that they went and talked to the nurse at her home in [REDACTED] and the nurses story is different from the parents story. Detective [REDACTED] reported that the nurse told her that she didnt want to move the child from his swing and that the dad was not doing the chest compressions deep enough when he was giving the child CPR. Detective [REDACTED] said that there will not be any criminal charges filed against the nurse, Ms. [REDACTED] the nursing supervisor called her but she told her she could not give her any information. SI requested the contact information for the nurse, the nursing supervisor and for notes from the interview with Ms. [REDACTED] SI thanked Detective [REDACTED] for her time and assistance.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/17/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 02/28/2014

Completed date: 02/28/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Detective [REDACTED] [REDACTED] Dr. [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/28/2014 03:12 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] attended preliminary autopsy meeting with Detective [REDACTED] with [REDACTED] Police and Dr. [REDACTED] with the [REDACTED] Medical Examiners Office on this date. SI is noting that Dr. [REDACTED] reported that the toxicology tests were negative and in her opinion no one did anything bad to [REDACTED] the nurse didnt give him oxygen but the death was natural and she cannot ensure that giving the child oxygen would have saved his life. Dr. [REDACTED] reported that they dont usually bring children in with congenital heart disease for autopsies unless there is some suspicion, the child shouldnt have come to their office, and he came because the hospitals refused to sign off on the death certificate. SI thanked Dr. [REDACTED] for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/16/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 02/28/2014

Completed date: 02/28/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/28/2014 02:59 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] was informed by Detective [REDACTED] that the preliminary autopsy meeting with Dr. [REDACTED] with the Medical Examiners Office was scheduled for 1/17/14 at 9 AM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/14/2014

Contact Method:

Contact Time: 12:50 PM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/11/2014 01:05 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that SI sent a request for medical records for [REDACTED] [REDACTED] from [REDACTED] [REDACTED] Hospital and [REDACTED] Medical Center on this date.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID:	████████	Status:	Completed
Contact Date:	01/10/2014	Contact Method:	Phone Call
Contact Time:	11:35 AM	Contact Duration:	Less than 15
Entered By:	████████ ██████████	Recorded For:	
Location:	DCS Office	Created Date:	01/14/2014
Completed date:	01/14/2014	Completed By:	████████ ██████████
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

████████ ██████████

Narrative Details

Narrative Type: Original Entry Date/Time: 01/14/2014 01:40 PM Entered By: ██████████ ██████████

SI ██████████ spoke to the mother, ██████████ ██████████ on this date. SI introduces self to Ms. ██████████ and informed her that the case had been transferred to SIU due to the home health nurse possibly being responsible. Ms. ██████████ informed SI that the funeral for her child is Monday, 1/13/14. Ms. ██████████ stated that no one from the home health agency has contacted her to see how she is doing or anything. Ms. ██████████ stated that her child died while she was asleep and while he was in the nurse's care and it hurts her that no one has called her about helping or anything. SI gave Ms. ██████████ SI's condolences and informed Ms. ██████████ to contact SI next week after the funeral to make arrangements for SI to come to the home and meet the family. SI thanked Ms. ██████████ for her time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/09/2014 Contact Method: Attempted Phone Call
 Contact Time: 10:25 AM Contact Duration: Less than 05
 Entered By: [REDACTED] [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/14/2014
 Completed date: 01/14/2014 Completed By: [REDACTED] [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Referent Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/14/2014 01:35 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] is noting that the referent was notified on this date. A separate recording will be entered to protect the confidentiality of the reporter.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/08/2014 Contact Method:
 Contact Time: 12:00 PM Contact Duration: Less than 05
 Entered By: [REDACTED] [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/14/2014
 Completed date: 01/14/2014 Completed By: [REDACTED] [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Well Being
 Contact Type(s): Case Summary
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/14/2014 12:56 PM Entered By: [REDACTED] [REDACTED]

SI [REDACTED] received Priority 1 referral of Neglect Death on this date as a transfer from local CPS towards alleged victim [REDACTED] against unknown alleged perpetrator. Referral states:

This child is not in custody

TFACTS: Yes

NOTE: No history was found for [REDACTED] [REDACTED] due to the common spelling and no DOB provided.

Family Case IDs: [REDACTED] (for [REDACTED] as a child) and [REDACTED] (blank case, DOB listed for [REDACTED] on this case as [REDACTED])

Open Court Custody/FSS/FCIP No

Closed Court Custody Yes, 9-3-98 to 11-2-01 - Case # [REDACTED] [REDACTED] [REDACTED]

Open CPS - No

Substantiated No

Death No

Screened out No

History (not listed above): Yes:

8/19/2004 - [REDACTED] - PHA and SRP - Allegation Unsubstantiated/ Perpetrator Unsubstantiated

County: [REDACTED]

Notification: None

School/ Daycare: None



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Native American Descent: No
 Directions: None Given

Reporter states: [REDACTED] [REDACTED] (5 months) lives with his mother [REDACTED] [REDACTED] birth father [REDACTED] [REDACTED] and maternal grandmother [REDACTED] [REDACTED]. There are no other children in the home.

[REDACTED] does have medical issues. He has a tracheotomy and also a feeding tube. He was born prematurely, but at this time, all of [REDACTED] medical issues are not known. He does have a home health nurse (persons information unknown, company unknown) with him at his home from 9:00 pm until 9:00 am on a nightly basis.

[REDACTED] last saw [REDACTED] at 1:30 am on January 7, 2014 and he appeared to be fine. He was in his swing in the living room. The living room has been transformed into [REDACTED] room due to all of his medical equipment and the assistance of the home health nurse (unknown name).

At approximately 4:30 am on January 7, 2014, the home health nurse called for [REDACTED] and said something was wrong with [REDACTED]. It is unknown if the home health nurse found him in his swing or somewhere else in the living room.

It is unknown what time Emergency Medical Services (EMS) was contacted or who contacted them. [REDACTED] was transported to [REDACTED] Medical Center at an unknown time on January 7, 2014. [REDACTED] was pronounced deceased at 5:55 am on January 7, 2014 at the hospital.

[REDACTED] had no obvious external trauma. It is unknown if his medical issues played a part in his death. [REDACTED] autopsy will be performed on January 8, 2014. The parents and grandparent have been interviewed about the situation. The home health nurse has not been interviewed. The Department of Children's Services Case Manager, [REDACTED] [REDACTED] has already responded to this case and was present for the interviews with the family members. At this time, no arrests or citations have been made or given out. The parents had no explanation for [REDACTED] death.

[REDACTED] was frequently at the hospital/medical facilities (since birth) until the past week. It is unknown if the parents, grandparent, or home health nurse have a history with the police or the Department of Children's Services.

The conditions of the home are not of concern (per reporter). The home was seen on January 7, 2014. The home had not been seen prior to today. The reporter has never had contact with the family prior to today.

SSMS: [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] and [REDACTED] [REDACTED] negative

County group emailed.

Per SDM: Investigative Track, P1, Child Death. [REDACTED] TL on 1-7-14 @ 12:46 pm

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/08/2014

Contact Method:

Contact Time: 08:45 AM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/08/2014

Completed date: 01/08/2014

Completed By: [REDACTED] [REDACTED] [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/08/2014 03:36 PM Entered By: [REDACTED] [REDACTED] [REDACTED]

CM was advised by LI [REDACTED] that the case would be transferred to SIU as soon as the notes were in TFACTS. This was accomplished at 3:35 PM and CM informed LI.

Narrative Type: Addendum 1 Entry Date/Time: 01/09/2014 08:12 AM Entered By: [REDACTED] [REDACTED] [REDACTED]

CM placed file in the Inneroffice mail addressed to SIU.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED] Case Name: [REDACTED] [REDACTED]
Case Status: Close Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 01/07/2014 Contact Method:
Contact Time: 11:50 AM Contact Duration: Less than 15
Entered By: [REDACTED] [REDACTED] [REDACTED] Recorded For:
Location: DCS Office Created Date: 01/08/2014
Completed date: 01/08/2014 Completed By: [REDACTED] [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Notation
Contact Sub Type:

Children Concerning

Participant(s)

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/08/2014 03:20 PM Entered By: [REDACTED] [REDACTED] [REDACTED]

The Department of Childrens Services received a referral which stated: Reporter states: [REDACTED] (5 months) lives with his mother [REDACTED] birth father [REDACTED] and maternal grandmother [REDACTED]. There are no other children in the home. [REDACTED] does have medical issues. He has a tracheotomy and also a feeding tube. He was born prematurely, but at this time, all of [REDACTED] medical issues are not known. He does have a home health nurse (persons information unknown, company unknown) with him at his home from 9:00 pm until 9:00 am on a nightly basis. [REDACTED] last saw [REDACTED] at 1:30 am on January 7, 2014 and he appeared to be fine. He was in his swing in the living room. The living room has been transformed into [REDACTED] room due to all of his medical equipment and the assistance of the home health nurse (unknown name). At approximately 4:30 am on January 7, 2014, the home health nurse called for [REDACTED] and said something was wrong with [REDACTED]. It is unknown if the home health nurse found him in his swing or somewhere else in the living room. It is unknown what time Emergency Medical Services (EMS) was contacted or who contacted them. [REDACTED] was transported to [REDACTED] Medical Center at an unknown time on January 7, 2014. [REDACTED] was pronounced deceased at 5:55 am on January 7, 2014 at the hospital. [REDACTED] had no obvious external trauma. It is unknown if his medical issues played a part in his death. [REDACTED] autopsy will be performed on January 8, 2014. The parents and grandparent have been interviewed about the situation. The home health nurse has not been interviewed. The Department of Childrens Services Case Manager, [REDACTED] [REDACTED] has already responded to this case and was present for the interviews with the family members. At this time, no arrests or citations have been made or given out. The parents had no explanation for [REDACTED] death. [REDACTED] was frequently at the hospital/medical facilities (since birth) until the past week. It is unknown if the parents, grandparent, or home health nurse have a history with the police or the Department of Childrens Services. The conditions of the home are not of concern (per reporter). The home was seen on January 7, 2014. The home had not been seen prior to today. The reporter has never had contact with the family prior to today.

At approximately 8:30 AM, CM [REDACTED] was informed by LI [REDACTED] the she had a P1 fatality at [REDACTED] Hospital and metro was on-scene. She instructed her to proceed to the hospital as a referral would be called in and the baby had passed earlier that day. CM prepared a file and proceeded to [REDACTED] ER.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/07/2014 Contact Method: Face To Face
 Contact Time: 10:01 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 01/08/2014
 Completed date: 01/08/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact,Notation,Parent/Caretaker Interview,Referent Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Det. [REDACTED] Det. [REDACTED], [REDACTED] Det. [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/08/2014 03:27 PM Entered By: [REDACTED]

CM arrived at the home and, while waiting for detectives and ME representative outside of the home, 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. When they all went in, CM observed an abundance of baby and medical supplies on the side of the crib which was in the living room. She observed that the parents recounted step by step the events of the night before and demonstrated what was and how to use every piece of medical equipment. Mom added that the nurse took his temperature when she arrived and it was 97.7; that they tried the oxygen, AMBO, and repositioning sensors, and that she changed out the sensor wand in case that was the problem with the readings. Dad stated that when he picked [REDACTED] up, the trachea collar was off in back and that it should never be off in back. The parents provided agency representatives with the HMO information- Home [REDACTED] (CM [REDACTED] and the name of Nurse [REDACTED] LPN. CM did not observe any notation in the progress log for the night of 1/6/13. The detectives informed that the parents that they were taking the book with them but would return it. Mom showed them the paperwork from [REDACTED] Pediatric where he had gotten shots on 1/6/14 from Dr. [REDACTED] MD. The parents stated that [REDACTED] would be released to [REDACTED] Funeral Home and were provided names of agencies that could help financially with the funeral.

10:50 AM- Continuing the investigation, CM interviewed [REDACTED] who stated that [REDACTED] and [REDACTED] were great parents; had trained extensively concerning care, and that they had also researched the internet in order to provide the safest environment possible for [REDACTED]. She stated that mom knew all about [REDACTED] moods and how to read his body language and know what he needed.

CM noted that as the ME asked additional support, family and friends began arriving at the home. All agency personnel assured the family that counseling services would be available for the parents before leaving the home.

3:25 PM- After returning to the office and completing it, CM [REDACTED] emailed LI [REDACTED] and TC [REDACTED] the Notice of Death form.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

3:39 PM- CM called Ms. [REDACTED] [REDACTED] enquired about mom, and provided her with the number to Mobile Crisis. She stated that she would attempt to provide resources that accepted TN for mom and advised her to contact Mobil Crisis if she felt they were needed.



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

Case Id: [REDACTED] Case Name: [REDACTED] [REDACTED]
Case Status: Close Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 01/07/2014 Contact Method: Face To Face
Contact Time: 08:59 AM Contact Duration: Less than 02 Hour
Entered By: [REDACTED] Recorded For:
Location: Hospital Created Date: 01/08/2014
Completed date: 01/08/2014 Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Referent Interview,Collateral Contact,Initial ACV Face To Face,Notation,Parent/Caretaker Interview
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Det. [REDACTED], Det. [REDACTED]; [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/08/2014 03:23 PM Entered By: [REDACTED] [REDACTED] [REDACTED]

CM was informed by the ER receptionist that the baby was in room [REDACTED]. When she arrived, Detectives [REDACTED] and [REDACTED] were present along with BM [REDACTED] BF [REDACTED] a representative from the Medical Examiners office, MA [REDACTED] MGM [REDACTED] and an unidentified uncle. To initiate the investigation, CM observed the interview already in progress and took notes. CM observed that during the interview with Det. [REDACTED] Ms. [REDACTED] stated that: [REDACTED] went to the doctors office on 12/31/14 and everything was ok but there was a discrepancy in the readings of the monitor at home and there so he was hospitalized for 24 hr. observation. Mom wanted to change nurses so he stayed there until the 2nd of January since the nurses station was closed. She was instructed to administer oxygen if [REDACTED] stats went too low at home. She stated that Nurse [REDACTED] came to the home on Thursday and Friday, Nurse [REDACTED] came on Saturday and Nurse [REDACTED] came back on Sunday (nights only 8 AM-8 PM). Yesterday [REDACTED] went to get his shots; everything was fine then and last night except he was a little fussy because of the shots. Nurse [REDACTED] (a floater) arrived at 8 PM and mom showed her how to use the suction machines and told her his distress signs to look for. [REDACTED] is on a NOS from 9 AM- 8 PM and wears a trachea collar from 8 PM- 9 AM. She checked on him at 11 PM and about 1 AM and he was fine. At 4:30 AM, the nurse yelled for her stating that something was wrong with [REDACTED] and mom suctioned him manually then with the deep suction machine- a little mucus came out. She stated that she woke up dad (since he was better at that than she was); they noticed the trachea collar was loose so they tightened it, and they called the ambulance because nothing was changing. The nurse stated told her [REDACTED] had been like that for twenty minutes but she didnt know what she meant since the nurse wasnt specific. Mom observed that he was listless. They had everything [REDACTED] needed in case of an emergency right there. They got the emergency bag and tried the AMBO while the nurse acted like she didnt know what to do. They started administering CPR since the machine wasnt picking up any signal from any position on [REDACTED] body. When the ambulance arrived, they assured her she did everything right and they would take over. She rode to the hospital in the ambulance. She gave the detective very detailed medical and feeding information. She stated that she , dad, her sister, and the grandmother all received care training before the baby came home and she trained even more since she was at the hospital.

CM observed that she was extremely knowledgeable about the babys care, the equipment, the medical terminology, etc. At one point mom picked [REDACTED] up to demonstrate and she was still very gentle with him and positioned her



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

hands in the correct safety positions even though he was deceased.

9:07 AM- CM observed that BF [REDACTED] [REDACTED] received permission to interject from Det. [REDACTED] then stated that: They (him and mom) were both asleep; the nurse woke them up, and something didnt look right about [REDACTED] looked kinda grey, the nurse said he had been like that for 20 minutes, and [REDACTED] was in the baby chair- demonstrated: listless with his hands at his side and body slumped. The nurse didnt have a phone, there was blood in the trachea, and he administered CPR and tried to calm mom down. He kept doing CPR and told nurse to call 911, the nurse left room and came back (twice), and he and mom administered emergency measures alone. The nurse did not call 911 and said she was going to lose her job. The EMT made the nurse take dad to the hospital as mom rode in the ambulance. The nurse got hysterical, said she was going to lose her job, and kept asking him did he have a lighter on the ride to the hospital. He cussed at her and told her she acted like [REDACTED] problems wasnt bothering her. When they reached the hospital, the nurse refused to come inside and talk to the doctors and when hospital personnel went out to get her, they returned and said she was pulling off when they went out.

9:17 AM- CM briefly interviewed MGM [REDACTED] [REDACTED] who stated that she was not home when the incident occurred but that the hour she was there- 10 PM-11 PM- [REDACTED] was fine, awake, playing. She stated that her number was [REDACTED] and the family resided with her.

Notation- Detective [REDACTED] explained the agencies represented and that everyone was going to the home and make inquiries together to minimize familys continued trauma. CM introduced herself during that speech and everyone but the family exited the room so that they could say goodbye to [REDACTED]

9:28 AM- Det. [REDACTED] informed CM that the baby was died when he arrived but resuscitation was attempted anyway and confirmed that the parents stated their home machines were going crazy and [REDACTED] appeared to be limp when they were awakened by the nurse.

9:33 AM- CM interviewed RN [REDACTED] [REDACTED] who stated that the shifts had changed but the attending Dr [REDACTED] name was [REDACTED]. She interviewed RN [REDACTED], who stated that the attending nurse- RN [REDACTED] had gone off shift and that she did not believe the baby was alive when he arrived but she wasnt sure. She gave CM a copy of the EMT report and doctors notes which perused and CM placed in the file.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 1/7/14 11:50 AM

Date of Assessment: 1/7/14 12:00 AM

Assessment Type: Initial

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.



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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: _____