



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

Case # 2014.016

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	2/3/2014	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	2/2/2014		
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:	N/A	
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:	N/A					
Describe (in detail) circumstances surrounding death/near death:						
<p>The parents stated around 12:00pm on 2-2-14, the father woke ██████████ up from his sleep to feed him. ██████████ did not want his bottle, nor was he as playful, however, he was alert. The parents stated they each held ██████████ passing him back and forward, trying to get the baby to drink his bottle and to be playful. The father stated he held the baby in his arms facing himself.</p>						
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:						
<p>This worker interviewed the parents in their three bedrooms and one bath home on 2-3-14, around 9:00pm. The father stated he got the baby up from his sleep around 12:00pm to feed, however, the baby did not want his bottle. The baby spit the milk out of his mouth and he was not as playful. According, the parents informed that the infant did not die in the baby's crib as reported. On 2/2/14, the mother informed that she awoken at 8:00 am, changed the infant and fed him a little of his 4oz bottle of milk. The infant fell asleep and she placed him in his crib. The mother informed she proceed to get the 2 y/o and 6 y/o up, fed them and dress the 6 y/o so that he could attend Church with his Aunt. The 2 y/o watched TV and the mom started her homework in another room (attends ██████████). The dad woke up around 11:00 am, got himself dressed and went to wake the infant up around 12:00 pm. The dad notice the child was not behaving as his usual self. He tried to feed the infant and the baby would not take the formula. He took the child to his mother and they both passed the infant back and forth, watching his reaction. Dad decided to take the child to the hospital. While dad went to get gas for the car, mom got herself, the 2 y/o and the infant dress. Upon dad return, they got in the car and went to the nearest hospital, ██████████. He pulled up to the entry of the hospital and let the mother with the infant out while he parked the car with the 2 y/o. When Dad arrived in the hospital, he saw mom still holding the infant filling out forms. The dad insisted that someone look at his baby and that is when they took the infant to the back. The police was called and took a report. The police also went to the home along with crime scene officers and took pictures.</p>						
If child was hospitalized, describe (in detail) DCS involvement during hospitalization:						
N/A						
Describe disposition of body (Death):	The decedent remain was transported to the ██████████ Medical Examiner's Office for an autopsy.					
Name of Medical Examiner/Coroner:	██████████	Was autopsy requested?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes		
Did CPS open an investigation on this Death/Near Death?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes				
Was there DCS involvement at the time of Death/Near Death?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes				
Type:	N/A	Case #:				

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child's Case File

CS-0635, Rev. 08/13

RD A 2993

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Describe law enforcement or court involvement, if applicable:

The police was called to the scene at the hospital. The police officers along with crime scene went to the home and took pictures.

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):

Name: [REDACTED], male	Age: 6 years old
Name [REDACTED], [REDACTED] male	Age: 2 years old
Name:	Age:
Name:	Age:
Name:	Age:

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

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

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

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

Contact Person: [REDACTED]	Telephone Number: [REDACTED]
Case Manager:	Telephone Number: () -
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]
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: 02/03/2014 06:50 PM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 02/03/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 02/04/2014 03:30 PM
 First Team Leader Assigned: [REDACTED] Date/Time 02/04/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 02/04/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	10 Mos	Lack of Supervision	No	[REDACTED]	Birth Father
[REDACTED]	10 Mos	Lack of Supervision	No	[REDACTED]	Birth Mother
[REDACTED]	10 Mos	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: No history found based on names, DOBs, SSNs, or address provided.
 Family Case IDs: N/A
 Open Court Custody/FSS/FCIP No
 Closed Court Custody No



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

Open CPS - No

Substantiated No

Death No

Screened out No

History (not listed above): No

DUPLICATE REFERRAL: No

County: [REDACTED]

Notification: None

School/ Daycare: None

Native American Descent: Unknown

Directions: None given

Reporters name/relationship: [REDACTED]

Reporter states:

This child is not in custody

FAXED REPORT ENTERED VERBATIM ***THIS CHILD IS NOT IN DCS CUSTODY***

This will serve as notification that the [REDACTED] Medical Examiner is investigating the death of [REDACTED]. This 1 month-old infant was found unresponsive in his crib at approximately 1100-1200 hrs on the morning of 2/02/14 by his mother at their residence at [REDACTED] and transported by them to [REDACTED] Hospital where death was pronounced at 1441 Hours. A scene investigation was conducted by this office and the [REDACTED] Police Department, and the decedents remains were transported to this office for autopsy. The cause/manner of death are pending at this time. The mothers name is [REDACTED] and the father is [REDACTED]. Two siblings also live in the house. Our case # is [REDACTED].

Per [REDACTED] Investigative Track, P1-[REDACTED], CMII @ 6:58PM on 2/3/14.

[REDACTED], TL on 02/03/14 @ 7:48 PM.

[REDACTED], Received on 02/03/14 @ 7:54 PM.

Child Death/Child Near Death Notification Group: [REDACTED],

[REDACTED] notified.



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

Participant(s)

Name: [REDACTED]
Gender: Female **Date of Birth:** [REDACTED] **Participant ID:** [REDACTED]
SSN: [REDACTED] **Race:** **Age:** 26 Yrs
Address:
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: Yes
DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: Unknown Participant [REDACTED] Unknown
Gender: **Date of Birth:** **Participant ID:** [REDACTED]
SSN: **Race:** **Age:**
Address:
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: No
DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: Unknown Participant [REDACTED] Unknown

Gender: Date of Birth: Participant ID: [REDACTED]

SSN: Race: Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: Unknown Participant [REDACTED] Unknown

Gender: Date of Birth: Participant ID: [REDACTED]

SSN: Race: Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED]

Race:

Age: 30 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: Unable to

Age: 10 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 02/03/2014

Assignment Date: 02/04/2014

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] [REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED] [REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED], 06/10/2014
2	[REDACTED]	[REDACTED] [REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED] [REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED], 06/10/2014
3	[REDACTED]	[REDACTED] [REDACTED]	Neglect Death	Unknown Participant [REDACTED]		*Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED], 10/16/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Lead Investigator [REDACTED] was informed by the Investigations Coordinator [REDACTED] that the classification of this case needed to be changed to unsubstantiated per the Deputy Director of Investigations [REDACTED] and Director of Investigations [REDACTED] in which it was decided that there was not enough evidence to substantiate. This case has been reviewed by all parties mentioned above and it was also reviewed by the Regional Investigations Director [REDACTED]. All investigative tasks have been completed and the case has been classified and reclassified as AUPU. The family will be notified of the change in classification.

D. Case Workers

Case Worker: [REDACTED]

Date: 06/10/2014

Team Leader: [REDACTED]

Date: 06/10/2014

E. Investigation Summary

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

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



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

Case Name : ██████████

Investigation ID: ██████████

CPSI met with the family monthly since 02/04/2014 ██████████. appeared to be healthy and taken care of by Ms. ██████████ and Mr. ██████████. CPSI did not observe ██████████ as he was deceased when the CPSI received the case.

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

The autopsy report for ██████████ stated, "The cause of death is bacterial pneumonia in the setting of severe malnourishment. The degree of malnourishment is unexplained, raising concerns of possible starvation and/or neglect. The pathologic changes in the brain are also unexplained. Hence the manner of death cannot be determined." ██████████ primary care physician stated ██████████ was in good health at his checkup after birth. ██████████ only had one visit to his primary care physician before his death. There was no record of complaints that ██████████ was not feeding properly. CPSI was also informed that soy milk can be given by the WIC clinic at the mother's request, and a doctor's prescription or explanation would not be needed.

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

Ms. ██████████ stated she complained to ██████████ primary care physician about ██████████ not feeding properly. Ms. ██████████ stated ██████████ was prescribed soy formula to help with his digestion and feedings.

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

None.

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

The department received this case 02/03/2014 with allegations of neglect death on ██████████ by ██████████ and lack of supervision on ██████████ by ██████████ and ██████████. It was found that Ms. ██████████ was neglectful and ██████████ is deceased as a result of this.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/16/2014

Contact Method:

Contact Time: 04:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/17/2014

Completed date: 10/17/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/17/2014 10:06 AM Entered By: [REDACTED]

Case Closure

Lead Investigator [REDACTED] was informed by the Investigations Coordinator [REDACTED] that the classification of this case needed to be changed to unsubstantiated per the Deputy Director of Investigations [REDACTED] and Director of Investigations [REDACTED] in which it was decided that there was not enough evidence to substantiate. This case has been reviewed by all parties mentioned above and it was also reviewed by the Regional Investigations Director [REDACTED]. All investigative tasks have been completed and the case has been classified and reclassified as AUPU. The family will be notified of the change in classification and the CS-0740 will be forwarded to the Judge and DA for notification of the classification and copy can be located in the case file. This case has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/01/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/01/2014

Completed date: 10/17/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/01/2014 12:58 PM Entered By: [REDACTED]

Admin Review

LI [REDACTED] has reviewed this case in which the case has been classified as ASPS and was agreed upon by the CPIT team on 5/30/14. The case has been transferred to homicide by law enforcement with all the information that has been collected. The investigation has been completed by Investigator [REDACTED]. The parents have been assessed by [REDACTED] in which it was noted that the parents could benefit from grief counseling of their deceased son. The indication letter has been mailed to the perpetrator and this case will be forwarded to the Regional Investigations Director [REDACTED] for further review and approval for closure.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 09/24/2014	Contact Method:
Contact Time: 03:46 PM	Contact Duration: Less than 05
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 09/24/2014
Completed date: 10/01/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): Case Summary	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 09/24/2014 03:47 PM Entered By: [REDACTED]

The Department of Childrens Services received this referral on 02/03/2014 with allegations of lack of supervision on [REDACTED] by [REDACTED] and [REDACTED] and neglect death on [REDACTED] by unknown. This is a non-custodial case, and the family has no history with the Department of Childrens Services.

It was reported that [REDACTED] was found unresponsive in his crib on 02/02/2014 between 11:30AM and 12:00PM and was transported to [REDACTED] Hospital by his parents, [REDACTED] and [REDACTED] was pronounced dead at 2:41PM on 02/02/2014 by Dr. [REDACTED] at [REDACTED] Hospital.

Lieutenant [REDACTED] responded to the scene. Department of Childrens Services Investigator [REDACTED] responded the following night, as that is when the referral was called into the Department of Childrens Services. The case was assigned to Department of Childrens Services Investigator [REDACTED] (DCS Investigator [REDACTED]) by Department of Childrens Services Lead Investigator [REDACTED] on 02/04/2014.

[REDACTED] were listed as perpetrators on the referral received by the Department of Childrens Services for lack of supervision on [REDACTED]. There was also an unknown perpetrator for the neglect death of [REDACTED].

Department of Childrens Services Investigator [REDACTED] interviewed Ms. [REDACTED] mother, and Mr. [REDACTED] father, in their home on 02/03/2014. The mother informed this worker of waking the three boys up around 8:00am on 2-2-14. The mother stated [REDACTED] age 6, got dress for church, and she [REDACTED] and [REDACTED] pampers. The mother gave the two year old something to eat for breakfast and [REDACTED] drank very little milk from his 4 oz bottle. The mother stated she played with [REDACTED] for a while before putting him down in his crib as he went back to sleep. [REDACTED] watched television and she began working on her homework for school. Around 11:00am, the father [REDACTED] awoken and got dressed. The father stated he awoke the infant around 12:00 noon. The father attempted to give the infant his bottle; however, the infant spit the milk out of his mouth. The father stated he held the infant in his arms facing himself, talking and playing with the infant. The infant was alert; however, not as playful and active as he was earlier. The father took the infant into the living room where the mother was working on her homework. The mother and father were passing the infant back and forward stating something is wrong with the infant because he was not as playful nor was he making noises. The father stated he suggested taking the infant to the hospital. The parents took the infant to [REDACTED] Hospital on [REDACTED] along with the two year old. The mother



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

stated the three boys had a cough/cold three days prior to 2-2-14. She had given the children Tylenol for their cough. Department of Children's Services Investigator [REDACTED] was also informed by the mother of taking [REDACTED] to the doctor on 12-9-13, on 12-10-13, to his pediatrician, on 12-28-13 for his 4 week checkup. The mother also stated she took [REDACTED] to the WIC office sometime in December 2013. The mother stated each time she took [REDACTED] to the WIC or doctor's office a nurse saw [REDACTED] and it was stated [REDACTED] was doing good to be a pre-mature baby.

On 02/05/2014, DCS Investigator [REDACTED] spoke with Dr. [REDACTED], medical examiner. Dr. [REDACTED] stated she is concerned because she has a report from a wellchild check up that states [REDACTED] was 7lbs and healthy last month, and now [REDACTED] weighs only 5lbs, is emaciated, has no fat tissue, and appears to be malnourished. Dr. [REDACTED] stated she is also concerned because the parents transported the child to the hospital in their personal vehicle rather than calling an ambulance. Dr. [REDACTED] stated the nurse that saw [REDACTED] upon arrival [REDACTED] appeared to already be deceased.

On 02/05/2014, DCS Investigator [REDACTED] interviewed Ms. [REDACTED] and Mr. [REDACTED] privately and separately in their home. Ms. [REDACTED] stated they had a little birthday party for [REDACTED] on 02/01/2014. Ms. [REDACTED] stated herself, Mr. [REDACTED] and [REDACTED] were present at their home for the party. Ms. [REDACTED] stated everything was fine 02/01/2014. Ms. [REDACTED] stated she woke up close to 8:00AM on 02/02/2014 to get [REDACTED] ready to go to church with Ms. [REDACTED] (maternal aunt). Ms. [REDACTED] stated she woke [REDACTED] up to get dressed and to eat. Ms. [REDACTED] stated she then woke [REDACTED] up. Ms. [REDACTED] stated she got [REDACTED] dressed and gave him breakfast. Ms. [REDACTED] stated she then fixed [REDACTED] a bottle before going to wake [REDACTED]. Ms. [REDACTED] stated [REDACTED] and [REDACTED] were watching television at this point. Ms. [REDACTED] stated she got [REDACTED] and tried to feed him, but [REDACTED] did not want to eat. Ms. [REDACTED] stated she played with [REDACTED] for a minute and tried to feed him again. Ms. [REDACTED] stated she put some formula on [REDACTED] lip and he spit it out. Ms. [REDACTED] stated she played with [REDACTED] a little while longer and kissed him on his nose. Ms. [REDACTED] stated she did not think anything of it at the time but looking back [REDACTED] nose was cold to the touch when she kissed [REDACTED] nose. Ms. [REDACTED] stated she put [REDACTED] back in the bed. Ms. [REDACTED] stated she got on the computer to do some homework for about 30 to 45 minutes. Ms. [REDACTED] stated she went to check on [REDACTED] and he appeared to be asleep. Ms. [REDACTED] stated Mr. [REDACTED] then woke up. Ms. [REDACTED] stated she went to get [REDACTED] out of the bed to try to feed him again. Ms. [REDACTED] stated herself and Mr. [REDACTED] passed [REDACTED] back and forth trying to get him to eat. Ms. [REDACTED] stated she put some milk on [REDACTED] lips. Ms. [REDACTED] stated [REDACTED] was holding his mouth open a little. Ms. [REDACTED] stated Mr. [REDACTED] noticed [REDACTED] was clinching and [REDACTED] mouth was pale. Ms. [REDACTED] stated Mr. [REDACTED] was getting worried and being over protective like he always is and wanted to take [REDACTED] to the hospital. Ms. [REDACTED] stated she did not think anything of it but stated they would take [REDACTED] to put Mr. [REDACTED] at ease. Ms. [REDACTED] stated Mr. [REDACTED] went to get gas, and she got [REDACTED] ready. Ms. [REDACTED] stated [REDACTED] was already gone with her sister to church. Ms. [REDACTED] stated she nuzzled (put her nose on his nose) [REDACTED] and [REDACTED] nose was cold. Ms. [REDACTED] stated she did not think anything of it at the time but looking back [REDACTED] was cold to the touch and his fingers were pale. Ms. [REDACTED] stated [REDACTED] was not responsive to touch and his fingers were curled up. Ms. [REDACTED] stated Mr. [REDACTED] returned, and they went to the hospital. Ms. [REDACTED] stated she asked a nurse to check [REDACTED] vitals, but no one would. Ms. [REDACTED] stated they sat in the waiting room. Ms. [REDACTED] stated a nurse looked over at [REDACTED] and grabbed him and ran in a room. Ms. [REDACTED] stated the nurse tried to resuscitate [REDACTED]. Ms. [REDACTED] stated she still does not know what happened to [REDACTED] and she just wants to know. Ms. [REDACTED] stated she scheduled an appointment for counseling for herself and Mr. [REDACTED] through a program at her job. Ms. [REDACTED] stated their appointment is Friday. Ms. [REDACTED] was very nonchalant when talking about the events that occurred with [REDACTED]. Ms. [REDACTED] did not cry and was not emotionally responsive to the situation. Mr. [REDACTED] stated [REDACTED] was acting normal the night before 02/02/2014. Mr. [REDACTED] stated the family celebrated [REDACTED] birthday, and they put the children to sleep. Mr. [REDACTED] stated [REDACTED] was going to church the next morning with Aunt [REDACTED] ([REDACTED]). Mr. [REDACTED] stated Ms. [REDACTED] got up when the alarm went off and Mr. [REDACTED] stayed asleep. Mr. [REDACTED] stated Ms. [REDACTED] got the children ready like any other day. Mr. [REDACTED] stated he heard [REDACTED] cry and saw Ms. [REDACTED] get [REDACTED]. Mr. [REDACTED] stated he saw Ms. [REDACTED] feeding [REDACTED] and Mr. [REDACTED] rolled over and went back to sleep. Mr. [REDACTED] stated he woke up around 11:00 or 12:00 and checked on [REDACTED] and [REDACTED]. Mr. [REDACTED] stated [REDACTED] was already gone. Mr. [REDACTED] stated he went to the bathroom. Mr. [REDACTED] stated Ms. [REDACTED] was feeding [REDACTED] when he came out of the bathroom. Mr. [REDACTED] stated [REDACTED] head was moving slowly and [REDACTED] mouth was open. Mr. [REDACTED] stated the movement was not a normal movement. Mr. [REDACTED] stated [REDACTED] was also



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

making a noise that was very faint. Mr. [REDACTED] stated the noise was not a cry or a whine but something different. Mr. [REDACTED] stated Ms. [REDACTED] put milk on [REDACTED] tongue and [REDACTED] spit it out. Mr. [REDACTED] stated himself and Ms. [REDACTED] started passing [REDACTED] back and forth trying to get him to eat. Mr. [REDACTED] stated he put [REDACTED] in his lap and was playing with [REDACTED] feet. Mr. [REDACTED] stated [REDACTED] usually pulls his feet back when Mr. [REDACTED] does this. Mr. [REDACTED] stated [REDACTED] did not pull back. Mr. [REDACTED] stated he touched his nose to [REDACTED] nose. Mr. [REDACTED] stated [REDACTED] usually scrunches his nose up when Mr. [REDACTED] does this, but [REDACTED] did not move. Mr. [REDACTED] stated he passed [REDACTED] back to Ms. [REDACTED]. Mr. [REDACTED] stated he was just staring at [REDACTED]. Mr. [REDACTED] stated he had a bad feeling and [REDACTED] looked weak. Mr. [REDACTED] stated he wanted to take [REDACTED] to the hospital, but Ms. [REDACTED] stated [REDACTED] would be fine. Mr. [REDACTED] stated he continued to stare at [REDACTED] and could not help but think something was wrong. Mr. [REDACTED] stated he was taking [REDACTED] to the hospital no matter how Ms. [REDACTED] felt about it. Mr. [REDACTED] stated he told Ms. [REDACTED] to get the children ready. Mr. [REDACTED] stated he left to put gas in the truck. Mr. [REDACTED] stated his hands were cold when he returned. Mr. [REDACTED] stated he touched [REDACTED] face with his finger and [REDACTED] did not move. Mr. [REDACTED] stated [REDACTED] hands were up and his fists were clenched. Mr. [REDACTED] stated he moved [REDACTED] arm to straighten it out and [REDACTED] arm slowly went back to the same position. Mr. [REDACTED] stated himself, Ms. [REDACTED], [REDACTED] and [REDACTED] got in the car and went to the hospital. Mr. [REDACTED] stated he parked at the front door and ran in the hospital. Mr. [REDACTED] stated no one would check on [REDACTED] and Mr. [REDACTED] was getting upset. Mr. [REDACTED] stated he asked a nurse to check [REDACTED] vitals and the nurse told him to have a seat. Mr. [REDACTED] stated a nurse walked by and looked at [REDACTED]. Mr. [REDACTED] stated the nurse immediately grabbed [REDACTED] and ran to the back with him. Mr. [REDACTED] stated himself and Ms. [REDACTED] were put in a room and no one would tell them what was going on. Mr. [REDACTED] stated it was a long time before anyone told them that [REDACTED] was deceased. Mr. [REDACTED] was very emotional. Mr. [REDACTED] cried the entire interview and blamed himself for [REDACTED] death. Mr. [REDACTED] felt like there was something he could have done that would have saved [REDACTED].

Ms. [REDACTED], paternal grandmother, was also interviewed privately. Ms. [REDACTED] stated she received a phone call from Mr. [REDACTED] on 02/02/2014 between 2:00 and 4:00. Ms. [REDACTED] stated Mr. [REDACTED] was crying and not making any sense. Ms. [REDACTED] stated she could not hear what Mr. [REDACTED] was saying so she hung up and called back. Ms. [REDACTED] stated Ms. [REDACTED] answered the phone when she called back. Ms. [REDACTED] stated Ms. [REDACTED] told her that [REDACTED] was dead. Ms. [REDACTED] stated she was trying to get information about what happened. Ms. [REDACTED] stated Mr. [REDACTED] and Ms. [REDACTED] kept passing the phone back and forth. Ms. [REDACTED] stated she got some information from both Mr. [REDACTED] and Ms. [REDACTED] and was able to make sense of what was happening. Ms. [REDACTED] stated Ms. [REDACTED] was calmer than Mr. [REDACTED] but Ms. [REDACTED] did hear Ms. [REDACTED] sniffing on the phone. Ms. [REDACTED] stated she also thinks she heard Ms. [REDACTED] cry out at one point. Ms. [REDACTED] stated she got on the next bus from [REDACTED] and came to be with Mr. [REDACTED] and Ms. [REDACTED]. Ms. [REDACTED] stated she sees the children every three months. Ms. [REDACTED] stated herself, Mr. [REDACTED] and Ms. [REDACTED] take turns visiting. Ms. [REDACTED] stated she has never had any concerns for the children. Ms. [REDACTED] stated she did baby proof the house a little more since she has been in the home. Ms. [REDACTED] stated she put protective coverings on the sockets and plastic caps on the doorknobs to prevent the children from injuring themselves or walking out of the home unattended. Ms. [REDACTED] stated she is able to stay in the home with Mr. [REDACTED] and Ms. [REDACTED] as long as needed. Ms. [REDACTED] stated both Mr. [REDACTED] and Ms. [REDACTED] are very upset. Ms. [REDACTED] stated Mr. [REDACTED] does not want anyone to see him cry, but Ms. [REDACTED] has heard him crying and noticed Mr. [REDACTED] did not eat anything until 02/04/2014. Ms. [REDACTED] stated there has been one other child death in the family. Ms. [REDACTED] stated her grandson died hours after birth due to heart problems.

On 02/11/2014, DCS Investigator [REDACTED] went to [REDACTED] to visit [REDACTED]. [REDACTED] was not at school, but the investigator spoke with the guidance counselor, Ms. [REDACTED]. Ms. [REDACTED] stated Ms. [REDACTED] ([REDACTED] teacher) spoke with her about [REDACTED] brother's death. Ms. [REDACTED] stated [REDACTED] has not had any problems at school. Ms. [REDACTED] stated she has an agreement with Ms. [REDACTED] to be informed if [REDACTED] starts acting out or exhibiting bad behaviors. Ms. [REDACTED] stated if something occurs she will call

On 02/14/2014, DCS Investigator [REDACTED] interviewed [REDACTED] (brother) privately. [REDACTED] stated his mother and father have been sad because [REDACTED] died. [REDACTED] stated he is a little sad but not very much. [REDACTED] stated he will see [REDACTED] again when he goes to heaven where [REDACTED] is. [REDACTED] stated he gets in trouble sometimes because of his conduct in school. [REDACTED] stated sometimes he gets a whooping. [REDACTED] stated [REDACTED] gets in trouble for getting into things at home. [REDACTED] stated neither him nor [REDACTED] ever have bruises from getting in trouble. [REDACTED] stated he



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

never saw ██████████ mistreated. ██████████ stated he feels safe at home. ██████████ stated his mother and father take care of him and treat him and ██████████ well.

On 02/14/2014, Ms. ██████████ and Mr. ██████████ began expressing their frustration with the Department of Children's Services being involved with the family and decided not to attend grief counseling.

On 02/28/2014, DCS Investigator ██████████ received a fax from ██████████ Hospital with medical records. The records indicate that ██████████ was deceased upon arrival at the hospital. It was also indicated that ██████████ appeared to be malnourished.

On 04/11/2014, DCS Investigator ██████████ received the autopsy report for ██████████. The autopsy stated: "The cause of death is bacterial pneumonia in the setting of severe malnourishment. The degree of malnourishment is unexplained, raising concerns of possible starvation and/or neglect. The pathologic changes in the brain are also unexplained. Hence the manner of death cannot be determined."

On 04/21/2014, DCS Investigator ██████████ arrived at ██████████ to obtain medical records on ██████████ and ██████████. DCS Investigator ██████████ was given medical records from one visit in 2012 and one visit on 02/06/2014 for ██████████ and ██████████ and one visit on 12/23/2013 on ██████████. DCS Investigator ██████████ spoke with Dr. ██████████. Dr. ██████████ stated he does not remember these children but looking at the records the children have only been in the office twice. DCS Investigator ██████████ asked if the children ever received shots in the office. Dr. ██████████ stated none of the children received shots in his office. Dr. ██████████ stated ██████████ would have had to get shots somewhere to be in school. Dr. ██████████ double checked the records and stated none of the children had shots there, but they may have gotten shots at the Health Department or WIC office. Dr. ██████████ stated ██████████ is in the 25th percentile on the growth chart, which is small, but his mass body index is in the normal range. Dr. ██████████ stated ██████████ is in the 75th percentile of the growth chart, which is normal. Dr. ██████████ stated ██████████ was small but in the normal range on the growth chart. ██████████ stated it would be notated if Ms. ██████████ had concerns about ██████████ weight or eating habits, but there is no notation of Ms. ██████████ bringing the concerns to the doctor's attention. DCS Investigator ██████████ was given a copy of the medical records.

On 04/21/2014, DCS Investigator ██████████ explained to the family that there are only two medical records for ██████████ and ██████████ at the doctor's office. DCS Investigator ██████████ explained that there is nothing documenting that Ms. ██████████ informed the doctor of ██████████ not eating properly. Ms. ██████████ stated she does not understand why there are not any more records because she knows that ██████████ has been to Dr. ██████████ office at least five times. Ms. ██████████ pointed out that in ██████████ and ██████████ records it states that they are doing well in school even though neither one of them are in school. Ms. ██████████ stated that she feels horrible for taking her children to a doctor that cannot keep proper records. DCS Investigator ██████████ asked where the children receive their shots. Ms. ██████████ stated the children receive shots at the WIC office and at Dr. ██████████ office. Ms. ██████████ showed the DCS Investigator ██████████ a copy of ██████████ shot record that was stamped by Dr. ██████████. Ms. ██████████ also showed DCS Investigator ██████████ a WIC voucher for soy milk with ██████████ name on it. Ms. ██████████ stated that she would have had to say something to someone to get the formula changed to soy milk. Ms. ██████████ stated the WIC office on ██████████ and the WIC office in the ██████████ should have records for the children. Mr. ██████████ stated ██████████ only went to Dr. ██████████ once and to the WIC office once. Mr. ██████████ stated Ms. ██████████ was going to do a walk in at the WIC office on 02/03/2014, but ██████████ died on 02/02/2014. DCS Investigator ██████████ gave the family the number to ██████████ for counseling, but they refused. Ms. ██████████ cried for the first time in the DCS Investigator ██████████ presence while talking about how frustrating it is that she keeps having to defend herself to everyone. Ms. ██████████ cried for a brief time and went back to talking about how she asked the doctor to put ██████████ on soy milk because Mr. ██████████ and ██████████ are lactose intolerant. After Mr. ██████████ left to go to work, Ms. ██████████ started talking about an essay that she has to write to get into the stipend program for social workers at the ██████████. ██████████ was asking the DCS Investigator ██████████ for advice on what to write in her essay and asking if the case would be over by June 1st so that she can turn her application in without having an open case.

On 04/22/2014, DCS Investigator ██████████ called the WIC Clinic to find out where to send a release of information to obtain records. DCS Investigator ██████████ was told that WIC records could not be sent to the DCS Investigator ██████████. DCS Investigator ██████████ was told that a parent could request that formula be changed to soy and that would be done without needing a prescription from a doctor.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

On 05/30/2014, DCS Investigator ██████████ attended the Child Protective Investigation Team Meeting and presented this case. It was decided that the case would be classified as Allegation Substantiated Perpetrator Substantiated for neglect death on ██████████ by ██████████. DCS Investigator ██████████ was also informed the case would be given to the ██████████ Police Department Homicide Unit for further investigation.

On 05/30/2014, Mr. ██████████ was unusually irritated during the home visit, especially when talking about the family going to grief counseling.

On 06/09/2014, Ms. ██████████ was not very talkative during the home visit and stated she wanted this all to be over.

On 06/25/2014, DCS Investigator ██████████ received a phone call from Dr. ██████████ (medical examiner). Dr. ██████████ stated she had a copy of ██████████ birth records when completing the autopsy, and there was nothing significant that happened at birth to cause ██████████ death. Dr. ██████████ stated there were findings of a brain abnormality; however, this was not noted at birth or at the two week check up. The brain abnormality has nothing to do with the malnourishment. Dr. ██████████ stated ██████████ apgar scores were eight and nine at birth. Dr. ██████████ stated the malnourishment that ██████████ suffered could not have happened over the course of a few days. Dr. ██████████ stated the state ██████████ was in would have had to take weeks. Dr. ██████████ stated ██████████ condition would have had to start after the two weeks mark due to medical records showing no problem with ██████████ at birth or his two week check up. Dr. ██████████ stated there is no way to know if it took four weeks or six weeks due to there being no studies on how long it takes for a child to die from malnourishment.

On 09/05/2014, DCS Investigator ██████████ received the parenting assessments on Ms. ██████████ and Mr. ██████████ from ██████████. There was a discrepancy in the notes regarding ██████████ death. The notes indicate that the parents noticed that ██████████ stopped breathing and rushed him to the emergency room when this was never reported previously. The parents have stated that ██████████ was not eating so they took him to the emergency room, but never mentioned ██████████ stopped breathing. The recommendation is that Ms. ██████████ and Mr. ██████████ receive grief counseling to address the loss of their son.

██████████, brother, was seen by DCS Investigator ██████████ on 02/05/2014, 02/14/2014, 03/14/2014, 04/21/2014, 05/30/2014, 06/09/2014, 07/23/2014, and 09/10/2014. ██████████ was not interviewed due to his age, but was observed to be happy and healthy during each visit.

DCS policy Work Aid 1 (E) defines the following criteria for Child Neglect Death:

1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
2. Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretakers failure to stop another person's direct action that resulted in the death of a child. Child deaths are always treated as severe child abuse.
3. Any child death that is the result of the caretakers failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.

There is a preponderance of evidence to substantiate the allegation of Child Neglect Death in the case of neglect death on ██████████.

The case will be closed and classified as Allegation Substantiated Perpetrator Substantiated for the allegation of Child Neglect Death.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/10/2014 Contact Method: Face To Face
 Contact Time: 03:30 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/11/2014
 Completed date: 09/11/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/11/2014 08:34 AM Entered By: [REDACTED]
 Investigator [REDACTED] arrived at [REDACTED] to conduct a visit with the family. Ms. [REDACTED] Mr. [REDACTED] and [REDACTED] were present. [REDACTED] came to the home later on the school bus.
 Ms. [REDACTED] and Mr. [REDACTED] were informed of the recommendation from the parenting assessment that the family receives grief counseling. Mr. [REDACTED] stated they plan to receive grief counseling once the department is out of the situation. Mr. [REDACTED] stated he is not going to be able to participate in grief counseling while he is constantly worried about the department coming to his home. Mr. [REDACTED] stated he needs to do this one at a time. Mr. [REDACTED] stated the department is prolonging the familys grief by coming out to the home every month. Mr. [REDACTED] stated he is aware that the investigator no longer asks questions about [REDACTED] death, but they know why the investigator is there and that is just as bad and constantly asking about the death. Ms. [REDACTED] agreed. Ms. [REDACTED] stated the family is planning on taking a trip to visit Mr. [REDACTED] family. Ms. [REDACTED] stated they will be going to [REDACTED] for 3 to 4 days. Ms. [REDACTED] stated the family needs a break from everything.
 [REDACTED] was observed to be dressed appropriately with no visible marks or bruises. [REDACTED] was sitting at the table eating when the investigator first arrived. [REDACTED] got down from the table and began playing the blocks. [REDACTED] was not interviewed due to his age.
 [REDACTED] came home from school on the school bus. [REDACTED] was observed to be dressed appropriately with no visible marks or bruises. [REDACTED] was excited to show his parents his progress report. Mr. [REDACTED] and Ms. [REDACTED] praised him for his good grades. Investigator [REDACTED] walked back to [REDACTED] room to speak to [REDACTED] privately. [REDACTED] reported no concerns and stated everything is fine. [REDACTED] talked about school and his friends. [REDACTED] told the investigator that he likes school and likes everything that is happening right now.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/05/2014

Contact Method:

Contact Time: 11:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/05/2014

Completed date: 09/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/05/2014 01:06 PM Entered By: [REDACTED]

Investigator [REDACTED] received the parenting assessments on Ms. [REDACTED] and Mr. [REDACTED] from [REDACTED]. There was a discrepancy in the notes regarding [REDACTED] death. The notes indicate that the parents noticed that [REDACTED] stopped breathing and rushed him to the emergency room when this was never reported previously. The parents have stated that [REDACTED] was not eating so they took him to the emergency room but never mentioned [REDACTED] stopped breathing. The recommendation is that Ms. [REDACTED] and Mr. [REDACTED] receive grief counseling to address the lost of their son.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/05/2014

Contact Method: Phone Call

Contact Time: 11:10 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/05/2014

Completed date: 09/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/05/2014 11:11 AM Entered By: [REDACTED]

Investigator [REDACTED] received a phone call from Ms. [REDACTED] A home visit was scheduled for 09/10/2014 at 3:30PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/05/2014

Contact Method: Phone Call

Contact Time: 11:04 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/05/2014

Completed date: 09/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/05/2014 11:09 AM Entered By: [REDACTED]

Investigator [REDACTED] called [REDACTED] to check on the status of the parenting assessment for Ms. [REDACTED] and Mr. [REDACTED] due to Ms. [REDACTED] stating the supervisor was going to send the assessment once it was reviewed. Investigator [REDACTED] spoke with the clinic supervisor, Ms. [REDACTED] and was told that the assessment would be emailed to the investigator within five minutes.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/05/2014

Contact Method: Attempted Phone Call

Contact Time: 11:03 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/05/2014

Completed date: 09/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/05/2014 11:04 AM Entered By: [REDACTED]

Investigator [REDACTED] called Ms. [REDACTED] to schedule a home visit. There was no answer. Investigator [REDACTED] left a message.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/29/2014

Contact Method: Attempted Phone Call

Contact Time: 10:28 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/29/2014

Completed date: 08/29/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/29/2014 10:29 AM Entered By: [REDACTED]

Investigator [REDACTED] called Ms. [REDACTED] to reschedule the home visit that was missed yesterday. There was no answer.
Investigator [REDACTED] left a message.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/28/2014

Contact Method: Phone Call

Contact Time: 03:11 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/28/2014

Completed date: 08/28/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/28/2014 03:18 PM Entered By: [REDACTED]

Investigator [REDACTED] called Ms. [REDACTED] to inform her that the investigator is running late. Ms. [REDACTED] asked how long it would be because the family has an appointment this evening. Investigator [REDACTED] informed Ms. [REDACTED] that the investigator is at Juvenile Court and is unsure what time the investigator would be able to make it to the home. It was agreed that the investigator would call Ms. [REDACTED] in the morning to reschedule.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/27/2014

Contact Method: Phone Call

Contact Time: 03:48 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/27/2014

Completed date: 08/27/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/27/2014 03:49 PM Entered By: [REDACTED]

Investigator [REDACTED] called Ms. [REDACTED] to schedule a home visit. The home visit was scheduled for 08/28/2014 at 3:30PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/25/2014

Contact Method:

Contact Time: 04:14 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/25/2014

Completed date: 08/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/25/2014 04:15 PM Entered By: [REDACTED]

Investigator [REDACTED] called [REDACTED] with [REDACTED] due to not receiving the parenting assessment today. Ms. [REDACTED] stated she would forward the assessment to the investigator.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/21/2014

Contact Method:

Contact Time: 12:42 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/21/2014

Completed date: 08/21/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/21/2014 12:44 PM Entered By: [REDACTED]

Investigator [REDACTED] called [REDACTED] with [REDACTED] to check on the status of the parenting assessments for Ms. [REDACTED] and Mr. [REDACTED]. Ms. [REDACTED] stated she is working on finishing up the report and will email it to the investigator tomorrow.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/08/2014

Contact Method:

Contact Time: 11:03 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/08/2014

Completed date: 08/08/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/08/2014 11:06 AM Entered By: [REDACTED]

Admin Review

LI [REDACTED] conferenced this case with Investigator [REDACTED] in regards to the next steps on this case. Inv. [REDACTED] has completed a case service request for the parents to have a parenting assessment. Inv. [REDACTED] will make a follow up face to face with the family for this month or as long as the case is open. Once the information from the assessment is collected, it will be forwarded to the RID [REDACTED] for review and case direction.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/07/2014

Contact Method:

Contact Time: 03:40 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/07/2014

Completed date: 08/07/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2014 03:41 PM Entered By: [REDACTED]

CPSI received a phone call from [REDACTED] with [REDACTED]. Ms. [REDACTED] stated she received information to complete a parenting assessment with Ms. [REDACTED] and Mr. [REDACTED]. Ms. [REDACTED] stated she will be calling the parents today to schedule the assessment.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/30/2014

Contact Method: Phone Call

Contact Time: 02:06 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/30/2014

Completed date: 07/30/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/30/2014 02:08 PM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to see if she and Mr. [REDACTED] would be willing to complete a parenting assessment. Ms. [REDACTED] stated this is an insult, but she will complete the assessment.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/23/2014

Contact Method:

Contact Time: 04:35 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/23/2014

Completed date: 07/23/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/23/2014 04:48 PM Entered By: [REDACTED]

Administrative Review/Notation

LI [REDACTED] consulted with DCS Legal in regards to the other children in the home. LI [REDACTED] spoke with DCS Attorney [REDACTED] who advised LI [REDACTED] that there were no further action to be taken with this family since the other children in the home had been medically cleared and no reports of abuse and/or neglect with them. This information will be shared with the PC, IC, and RID.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/23/2014 Contact Method: Face To Face
 Contact Time: 03:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 07/23/2014
 Completed date: 07/23/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/23/2014 04:28 PM Entered By: [REDACTED]

CPSI [REDACTED] and LI [REDACTED] arrived at [REDACTED] to conduct a visit with the family. Mr. [REDACTED] Ms. [REDACTED] and [REDACTED] were present.

CPSI observed [REDACTED] to be sitting in the chair in the living room. [REDACTED] later came into the living room and sat in the chair with [REDACTED]. [REDACTED] spoke with the CPSI about going to his fathers house. [REDACTED] stated he and [REDACTED] have been fine. [REDACTED] stated his parents have also been okay. [REDACTED] told the CPSI that he is not sure if he is ready to go back to school. [REDACTED] told the CPSI that he is going to 2nd grade. [REDACTED] pointed to the pictures on the mantel and told the CPSI that the pictures were of [REDACTED]. [REDACTED] also pointed to the fish and talked about the fish in the fish tank. CPSI could not understand much of what [REDACTED] was saying about the fish. [REDACTED] and [REDACTED] were observed to be dressed appropriately with no visible marks or bruises.

LI [REDACTED] spoke with Mr. [REDACTED] and Ms. [REDACTED] about any concerns that they might have. Both Mr. [REDACTED] and Ms. [REDACTED] had many questions about the case and the status of the case. Ms. [REDACTED] and Mr. [REDACTED] voiced their frustration with the case being ongoing for so long. Ms. [REDACTED] and Mr. [REDACTED] stated they feel that the CPSI coming to the home is just a constant reminder of the death of their son, and they are unable to move past the death and grieve with the CPSI calling or coming to the home. Both Ms. [REDACTED] and Mr. [REDACTED] expressed their frustrations about Dr. [REDACTED] medical records being incorrect and the WIC records being unavailable for review. Ms. [REDACTED] and Mr. [REDACTED] stated they plan to hire a lawyer to look into the situation because they do not feel that it is fair that records are not being released or are incorrect, and the family is being looked at because of this. CPSI [REDACTED] and LI [REDACTED] explained that all records that are able to be requested have been requested and reviewed. It was explained that initially the department was trying to construct a timeline to get a better understanding of what is going on. It was explained that with the information received it is hard to pinpoint a timeline. It was explained that the case is being reviewed, and the CPSI is just coming to the home to make sure the family is doing well and does not need any services or assistance from the department. Ms. [REDACTED] and Mr. [REDACTED] both stated they understand the position of the department but expressed being eager for this to all come to an end. CPSI informed Ms. [REDACTED] and Mr. [REDACTED] that the CPSI will continue to stay in touch with them and give updates as necessary.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/21/2014

Contact Method: Phone Call

Contact Time: 12:59 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/21/2014

Completed date: 07/21/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/21/2014 01:01 PM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to reschedule the home visit scheduled for 07/22/2014 due to a scheduling conflict. The home visit was rescheduled for 07/23/2014 at 3:00PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/17/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/17/2014

Completed date: 07/17/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/17/2014 09:09 AM Entered By: [REDACTED]

CPSI received medical records from the birth of [REDACTED] for both Ms. [REDACTED] and [REDACTED]. There was nothing concerning in the records. The records will be placed in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/14/2014

Contact Method: Phone Call

Contact Time: 01:56 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/14/2014

Completed date: 07/14/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/14/2014 01:59 PM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to schedule a home visit. A home visit was scheduled for 07/22/2014 at 3:00PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/14/2014

Contact Method:

Contact Time: 11:50 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/15/2014

Completed date: 07/15/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/15/2014 01:35 PM Entered By: [REDACTED]

Admin Review

LI [REDACTED] and Investigator [REDACTED] conferenced this case. It was discussed that another face to face would be made with the family and Inv. [REDACTED] wants LI [REDACTED] to accompany her with the visit. Follow up visits will continue to be made with the family until case has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/25/2014

Contact Method:

Contact Time: 03:33 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/15/2014

Completed date: 07/15/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/15/2014 01:27 PM Entered By: [REDACTED]

Admin Review

LI [REDACTED] sent information to the RID in regards to this case. Once a decision is made regarding the classification, it will be entered into the case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/25/2014

Contact Method:

Contact Time: 03:07 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/25/2014

Completed date: 06/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/25/2014 03:19 PM Entered By: [REDACTED]

CPSI received a phone call from Dr. [REDACTED] (medical examiner). Dr. [REDACTED] stated she had a copy of [REDACTED] birth records when completing the autopsy, and there was nothing significant that happened at birth to cause [REDACTED] death. Dr. [REDACTED] stated there were findings of a brain abnormality; however, this was not noted at birth or at the two week check up. The brain abnormality has nothing to do with the malnourishment. Dr. [REDACTED] stated [REDACTED] apgar scores were eight and nine at birth. Dr. [REDACTED] stated the malnourishment that [REDACTED] suffered could not have happened over the course of a few days. Dr. [REDACTED] stated the state [REDACTED] was in would have had to take weeks. Dr. [REDACTED] stated [REDACTED] condition would have had to start after the two weeks mark due to medical records showing no problem with [REDACTED] at birth or his two week check up. Dr. [REDACTED] stated there is no way to know if it took four weeks or six weeks due to there being no studies on how long it takes for a child to die from malnourishment.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/25/2014

Contact Method:

Contact Time: 10:59 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/25/2014

Completed date: 06/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/25/2014 11:00 AM Entered By: [REDACTED]

CPSI mailed a release of information to [REDACTED] to obtain a copy of [REDACTED] birth records.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/25/2014	Contact Method:	
Contact Time:	10:49 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/25/2014
Completed date:	06/25/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 06/25/2014 10:51 AM Entered By: [REDACTED]

CPSI called [REDACTED] to inquire about how to obtain [REDACTED] birth records. CPSI was given an address to mail the records to and was told that the records would be sent to the CPSI within 7 to 10 days of receipt.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/20/2014

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/15/2014

Completed date: 07/15/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/15/2014 01:11 PM Entered By: [REDACTED]

Admin Review

LI [REDACTED] was asked for more information pertaining to this case from the RID. Once the information is obtained it will be forwarded to the RID for approval of possible closure on this case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/10/2014	Contact Method:	
Contact Time:	07:51 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/10/2014
Completed date:	06/10/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 06/10/2014 08:14 AM Entered By: [REDACTED]

LACK OF SUPERVISION:

DCS Policy defines Lack of Supervision as a failure to provide adequate supervision by a parent or other caretaker, who is able to do so. A lack of supervision allegation or determination means that the child has been placed in a situation that requires actions beyond the child's level of maturity, physical ability, and/or mental ability; or the Caregiver inadequately supervises a child. The caregiver is with the child but is unable or unwilling to supervise (e.g., the caregiver is under the influence of alcohol or drugs, is depressed, sleeps during the day, or has inadequate parenting knowledge or skills). Lack of Supervision is also defined as any registered sex offender residing in a home with unrelated minor children or victim of offender, and/or caregiver knowingly resides with and/or allows children to be unsupervised with a registered sex offender.

NEGLECT DEATH:

DCS Policy defines any child death that is the result of the caretakers failure to meet childcare responsibilities.

The department received this referral 02/03/2014 with allegations of lack of supervision on [REDACTED] by [REDACTED] and [REDACTED] Sr. and neglect death of [REDACTED] by [REDACTED]. The autopsy report for [REDACTED] stated, "The cause of death is bacterial pneumonia in the setting of severe malnourishment. The degree of malnourishment is unexplained, raising concerns of possible starvation and/or neglect. The pathologic changes in the brain are also unexplained. Hence the manner of death cannot be determined." Ms. [REDACTED] stated [REDACTED] had problems feeding since birth and this was reported to his primary care doctor. Ms. [REDACTED] stated Dr. [REDACTED] (PCP) prescribed soy milk to [REDACTED] as a result of the issue with his feedings. CPSI requested medical records for [REDACTED] from his primary care doctor as well as the WIC clinic he went to for shots. The medical records from the primary care doctor were not clear. CPSI spoke with Dr. [REDACTED] (PCP) who stated there was never a complaint made to him about [REDACTED] feedings or a prescription written for soy milk. Dr. [REDACTED] stated [REDACTED] was within normal limits on the growth scale when he was seen in the office for his checkup. Dr. [REDACTED] also stated that [REDACTED] and [REDACTED] are within normal limits as well, with [REDACTED] being in the 25th percentile and [REDACTED] being in the 75th percentile on the growth chart. CPSI requested records from the WIC clinic and was informed that those records cannot be released as they are not medical records. CPSI asked a WIC representative about soy milk being given to an infant. The WIC representative stated a parent can request soy milk for a child without a prescription. Legal was contacted to obtain WIC records for the department but was unsuccessful as the WIC clinic informed the attorney that a subpoena would



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

be required. CPSI has completed visits with the family monthly since February. CPSI has no immediate concerns for [REDACTED] or [REDACTED] and [REDACTED] appear to be healthy and happy children with no issues. The family was offered counseling numerous times during the course of the investigation. The family refused counseling. The SDM score is conditionally safe. This case will be classified as ASPS for neglect death and AUPU for lack of supervision. This case will be submitted to the supervisor 06/10/2014 for approval of casework.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/09/2014 Contact Method: Face To Face
 Contact Time: 04:19 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 06/10/2014
 Completed date: 06/10/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/10/2014 07:45 AM Entered By: [REDACTED]

CPSI arrived at [REDACTED] to conduct a visit with the family. [REDACTED] [REDACTED] and Ms. [REDACTED] were present. Mr. [REDACTED] was already gone to work when the CPSI arrived.

[REDACTED] and [REDACTED] were observed to be in [REDACTED] room sitting on the bed. [REDACTED] was watching television, and [REDACTED] was playing on his Nintendo DS. [REDACTED] and [REDACTED] were observed to be dressed appropriately with no visible marks or bruises. [REDACTED] screamed when he saw the CPSI and hid under the blankets. CPSI spoke with [REDACTED] [REDACTED] stated he spent some time with his father. [REDACTED] stated he enjoyed that. [REDACTED] stated he played video games and played basketball with his father. [REDACTED] stated he is happy to be back home but wants to go back to his father's home to visit soon. [REDACTED] stated [REDACTED] has been getting in trouble for jumping on the bed. [REDACTED] stated [REDACTED] fell off the bed while jumping on it twice, so he gets in trouble for jumping on the bed now. [REDACTED] stated his mother and Mr. [REDACTED] who he calls dad, have been doing a lot better. [REDACTED] stated his mother and Mr. [REDACTED] have not been as sad as they used to be. [REDACTED] stated everything at home is "great". [REDACTED] stated he is doing fine as well. [REDACTED] was coming out from under the blankets poking the CPSI while the CPSI was talking to [REDACTED] [REDACTED] would hid under the blankets again every time the CPSI would look at him.

Ms. [REDACTED] was not very talkative this visit. Ms. [REDACTED] stated she really had no new concerns as we addressed them during the last visit. Ms. [REDACTED] stated this has been going on long enough, and she is ready to "see the light at the end of the tunnel". CPSI informed Ms. [REDACTED] to call the CPSI if she thinks of anything. Ms. [REDACTED] agreed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/09/2014

Contact Method:

Contact Time: 04:09 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/09/2014

Completed date: 06/09/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/09/2014 04:13 PM Entered By: [REDACTED]

Admin Review

[REDACTED] has reviewed this case in which the case has been classified as ASPS and was agreed upon by the CPIT team. The case has been transferred to homicide by law enforcement with the information collected. The investigation has been completed by Investigator [REDACTED]. A face to face will be made with the family prior to case being submitted for closure. The indication letter will be mailed to the perpetrator and this case will be forwarded to the Regional Investigations Director [REDACTED] for further review and approval for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/06/2014

Contact Method: Attempted Phone Call

Contact Time: 09:46 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/06/2014

Completed date: 06/06/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/06/2014 09:47 AM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to confirm the home visit with [REDACTED] today at 4:00PM. There was no answer. CPSI was unable to leave a message.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 05/30/2014 Contact Method: Face To Face
 Contact Time: 03:00 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 05/30/2014
 Completed date: 05/30/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/30/2014 09:22 PM Entered By: [REDACTED]

CPSI arrived at [REDACTED] accompanied by CPSI [REDACTED] and [REDACTED] to conduct a visit with the family. Mr. [REDACTED] Ms. [REDACTED] and [REDACTED] were present in the home.

[REDACTED] was in his bedroom at the beginning of the visit. [REDACTED] ran into the living room later. Ms. [REDACTED] held [REDACTED] in her lap for a minute before [REDACTED] got up and was being active as usual. [REDACTED] was observed to be dressed appropriately with no visible marks or bruises. CPSI [REDACTED] and CPSI [REDACTED] spoke to [REDACTED] about his game and Mr. [REDACTED] phone that [REDACTED] was holding, but [REDACTED] is not able to carrying conversations due to his age.

Ms. [REDACTED] stated [REDACTED] was with his father, [REDACTED]. Ms. [REDACTED] stated she thought about bringing [REDACTED] home for the home visit but changed her mind and let [REDACTED] stay with his father. CPSI asked if [REDACTED] and Mr. [REDACTED] relationship has improved due to Ms. [REDACTED] stating earlier in the investigation that Mr. [REDACTED] was not involved in [REDACTED] life. Ms. [REDACTED] stated Mr. [REDACTED] usually comes to see [REDACTED] when he gets a letter in the mail about child support. Ms. [REDACTED] stated she does not want to take [REDACTED] from his father, so she lets [REDACTED] visit Mr. [REDACTED] when Mr. [REDACTED] wants to see him. CPSI asked Ms. [REDACTED] if it would be okay for the CPSI to visit with [REDACTED] while he is with his father due to him not being present. Ms. [REDACTED] very quickly stated that she does not want the CPSI meeting with [REDACTED] while he is with his father. Ms. [REDACTED] seemed shocked when the CPSI asked about this. Ms. [REDACTED] agreed to call the CPSI when [REDACTED] returns home next week so the CPSI can complete a visit with him.

CPSI [REDACTED] spoke with the family about what has been going on since the last visit. Ms. [REDACTED] stated she has not called about grief counseling because she has not felt like going. Mr. [REDACTED] asked CPSI [REDACTED] if it was mandatory that the family goes to counseling because the family is asked during every visit about whether they have attended counseling. CPSI [REDACTED] stated that it is not mandatory, but counseling can help with the loss of a loved one. CPSI [REDACTED] also pointed out that Mr. [REDACTED] and Ms. [REDACTED] were interested in counseling during the last home visit. Ms. [REDACTED] stated she was interested "a little", but she looked at some information about the counseling and changed her mind. Ms. [REDACTED] did not mention what made her change her mind. Ms. [REDACTED] stated it may just be an excuse, but she feels that talking to Mr. [REDACTED] about [REDACTED] death is enough for her. Mr. [REDACTED] stated he feels that counseling will not help him because he will know what going to counseling is about, and it will remind him of all of the hurt he has experienced. Mr. [REDACTED] stated every time he is starting



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

to feel better CPSI [REDACTED] has come out to the home. Mr. [REDACTED] stated he can only see counseling being the same as the CPSI [REDACTED] home visits, a constant reminder that his son is gone.

Mr. [REDACTED] and Ms. [REDACTED] asked where the department is in the investigation and how much longer "this" has to go on. CPSI [REDACTED] explained that the department has still been trying to obtain records from the WIC office. CPSI [REDACTED] explained that our Legal department has had to contact the WIC office, and the WIC office is not going to release the WIC records without a subpoena. CPSI [REDACTED] explained that there are decisions still being made as to whether the department needs to go forward with the subpoena.

Ms. [REDACTED] demeanor was the same as usual. Ms. [REDACTED] was pleasant and asked questions during the visit. Ms. [REDACTED] was talkative and mentioned different things going on in their lives. Ms. [REDACTED] mentioned that the two year anniversary of Mr. [REDACTED] and Ms. [REDACTED] marriage is this coming Sunday and that she is almost done with school. Ms. [REDACTED] also showed the CPSI [REDACTED] trophy for remaining on Honor Roll all year.

Mr. [REDACTED] demeanor was not the same as usual during the visit. Mr. [REDACTED] is usually fairly quiet, and he tends to cry during home visits. Mr. [REDACTED] was noticeably irritated. Mr. [REDACTED] mentioned several times during the visit that he does not like that the CPSI has to continue to come to the home and asked what it is going to take for the department to be finished with their investigation. However, Mr. [REDACTED] was still pleasant even though he was visibly upset about the continuous home visits. Mr. [REDACTED] spoke to CPSI [REDACTED] and CPSI [REDACTED] about his job and how he was happy to have a day off today and on Saturday. Mr. [REDACTED] also mentioned a memorial that they made for [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Created In Error
 Contact Date: 05/30/2014 Contact Method: Face To Face
 Contact Time: 01:30 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 05/30/2014
 Completed date: 05/30/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): CPIT (Child Protective Investigative Team)
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/30/2014 07:32 AM Entered By: [REDACTED]

CPSI attended the CPIT meeting and presented this case. It was agreed that the case will be classified as ASPS for neglect death on [REDACTED] by [REDACTED].

Narrative Type: Created In Error Entry Date/Time: 05/30/2014 09:52 PM Entered By: [REDACTED]

CPSI recorded this note under the wrong date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/29/2014

Contact Method: Face To Face

Contact Time: 01:30 PM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/30/2014

Completed date: 05/30/2014

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/30/2014 09:53 PM Entered By: [REDACTED]

CPSI attended the CPIT meeting and presented this case. It was agreed that the case will be classified as ASPS for neglect death on [REDACTED] by [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/29/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/30/2014

Completed date: 05/30/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/30/2014 09:56 PM Entered By: [REDACTED]

CPSI saw Attorney [REDACTED] at court on another matter and asked him about the WIC records for [REDACTED]. CPSI was informed that Attorney [REDACTED] was told by the WIC office that the records are not given out, and a subpoena would need to be obtained in order to obtain the WIC records. Attorney [REDACTED] stated he told the person he spoke to that there is no court involvement on the case which would provide opportunity for a subpoena to be obtained. Attorney [REDACTED] stated he spoke to two different people at the WIC office, and he was told by both people that a subpoena would be needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/23/2014

Contact Method: Phone Call

Contact Time: 02:51 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/23/2014

Completed date: 05/23/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/23/2014 02:52 PM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to schedule a home visit. A home visit was scheduled for 05/30/2014 at 3:00PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/15/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/09/2014

Completed date: 06/09/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/09/2014 04:09 PM Entered By: [REDACTED]

Admin Review

[REDACTED] was able to follow up with Investigator [REDACTED] in regards to this case. Inv. [REDACTED] will continue to make face to face contact with the family as long as the case is open. LI sent a follow up request with DCS legal [REDACTED] regarding WIC records. Once the information is received, further documentation will be added to this case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/30/2014

Contact Method: Correspondence

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/30/2014

Completed date: 04/30/2014

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/30/2014 10:24 AM Entered By: [REDACTED]

CPSI received the referral back from CPIT. The referral had a note stating the DA's office is waiting to coordinate this case with the homicide unit.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	04/29/2014	Contact Method:	
Contact Time:	10:54 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/14/2014
Completed date:	05/14/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 05/14/2014 10:41 AM Entered By: [REDACTED]

Administrative Review

LI [REDACTED] contacted DCS legal to help with getting WIC records on the infant to help with the investigation. This case will remain open until the records are received and for CPIT to make a decision. Investigator [REDACTED] will remain in contact with the family as the case is still open.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/22/2014

Contact Method:

Contact Time: 04:10 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/22/2014

Completed date: 04/22/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/22/2014 04:22 PM Entered By: [REDACTED]

CPSI called the WIC Clinic to find out where to send a release of information to obtain records. CPSI was told that WIC records could not be sent to the CPSI. CPSI was told that a parent could request that formula be changed to soy and that would be done without needing a prescription from a doctor.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 04/21/2014 Contact Method: Face To Face
 Contact Time: 03:02 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 04/22/2014
 Completed date: 05/08/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/22/2014 09:46 AM Entered By: [REDACTED]

CPSI arrived at [REDACTED] accompanied by CPSI [REDACTED] to conduct a visit with the family. Mr. [REDACTED] Ms. [REDACTED] and [REDACTED] were present. [REDACTED] was still at school.

CPSI observed [REDACTED] to be dressed appropriately with no visible marks or bruises. [REDACTED] was playing in the living room floor for most of the visit. [REDACTED] climbed in Mr. [REDACTED] lap when Mr. [REDACTED] began to cry. After Mr. [REDACTED] left to go to work. [REDACTED] was playing with the game controller saying game game.

CPSI explained to the family that there are only two medical records for [REDACTED] and [REDACTED] at the doctor's office. CPSI explained that there is nothing documenting that Ms. [REDACTED] informed the doctor of [REDACTED] not eating properly. Ms. [REDACTED] stated she does not understand why there are not any more records because she knows that [REDACTED] has been to Dr. [REDACTED] office at least five times. Ms. [REDACTED] pointed out that in [REDACTED] and [REDACTED] records it states that they are doing well in school even though neither one of them are in school. Ms. [REDACTED] stated that she feels horrible for taking her children to a doctor that cannot keep proper records. CPSI asked where the children receive their shots. Ms. [REDACTED] stated the children receive shots at the WIC office and at Dr. [REDACTED] office. Ms. [REDACTED] showed the CPSI a copy of [REDACTED] shot record that was stamped by Dr. [REDACTED] Ms. [REDACTED] also showed that CPSI a WIC voucher for soy milk with [REDACTED] name on it. Ms. [REDACTED] stated that she would have had to say something to someone to get the formula changed to soy milk. Ms. [REDACTED] stated the WIC office on [REDACTED] and the WIC office in the [REDACTED] should have records for the children. Mr. [REDACTED] stated [REDACTED] only went to Dr. [REDACTED] once and to the WIC office once. Mr. [REDACTED] stated Ms. [REDACTED] was going to do a walk in at the WIC office on 02/03/2014, but [REDACTED] dies on 02/02/2014.

CPSI spoke with the family about reconsidering grief counseling and gave the family the number to [REDACTED]. Mr. [REDACTED] stated he just wants everything to be over. Mr. [REDACTED] stated he cannot think about anything else until the investigation is over. CPSI explained that it would be good for them to start counseling even if the investigation is not over because after the investigation is over there will be something else holding him back from going. Ms. [REDACTED] and Mr. [REDACTED] agreed to call [REDACTED] to get more information about the program.

Mr. [REDACTED] was very distraught. Mr. [REDACTED] stated he cannot grieve the loss of his son because people are constantly asking questions. Mr. [REDACTED] stated he is constantly having to relive his son's death. Mr. [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

stated he feels like a failure because he did not protect his family. Mr. [REDACTED] was crying and staring at the wall for a while before he got up to go to work.

Ms. [REDACTED] cried for the first time in the CPSI's presence while talking about how frustrating it is that she keeps having to defend herself to everyone. Ms. [REDACTED] cried for a brief time and went back to talking about how she asked the doctor to put [REDACTED] on soy milk because Mr. [REDACTED] and [REDACTED] are lactose intolerant. After Mr. [REDACTED] left to go to work, Ms. [REDACTED] started talking about an essay that she has to write to get into the stipend program for social workers at the [REDACTED]. Ms. [REDACTED] was asking the CPSI for advice on what to write in her essay and asking if the case would be over by June 1st so that she can turn her application in without having an open case.

Ms. [REDACTED] left the home to pick [REDACTED] up from the bus stop. CPSI waited outside for the family to return home. CPSI spoke to [REDACTED] in the driveway while Ms. [REDACTED] went inside with [REDACTED]. [REDACTED] was observed to be dressed appropriately with no visible marks or bruises. [REDACTED] stated he had a great day at school. [REDACTED] stated he has to count money for homework. [REDACTED] had some food on his shirt and stated he liked his lunch today. [REDACTED] stated himself and [REDACTED] got in trouble over the weekend for being too loud. [REDACTED] stated Ms. [REDACTED] just told them to stop yelling. [REDACTED] stated his mother and father are not as sad anymore and things are getting better. [REDACTED] expressed no concerns to the CPSI.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

Case Recording Details

Recording ID: ██████████

Status: Completed

Contact Date: 04/21/2014

Contact Method: Face To Face

Contact Time: 09:34 AM

Contact Duration: Less than 45

Entered By: ██████████

Recorded For:

Location: Other Community Site

Created Date: 04/22/2014

Completed date: 04/22/2014

Completed By: ██████████

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/22/2014 09:12 AM Entered By: ██████████

CPSI arrived at ██████████ to obtain medical records on ██████████ ██████████ and ██████████ CPSI was given medical records from one visit in 2012 and one visit on 02/06/2014 for ██████████ and ██████████ and one visit on 12/23/2013 on ██████████ CPSI spoke with Dr. ██████████ Dr. ██████████ stated he does not remember these children but looking at the records the children have only been in the office twice. CPSI asked if the children ever received shots in the office. Dr. ██████████ stated none of the children received shots in his office. Dr. ██████████ stated ██████████ would have had to get shots somewhere to be in school. Dr. ██████████ double checked the records and stated none of the children had shots there, but they may have gotten shots at the Health Department or WIC office. Dr. ██████████ stated ██████████ is in the 25th percentile on the growth chart, which is small, but his mass body index is in the normal range. Dr. ██████████ stated ██████████ is in the 75th percentile of the growth chart, which is normal. Dr. ██████████ stated ██████████ was small but in the normal range on the growth chart. Dr. ██████████ stated it would be notated if Ms. ██████████ had concerns about ██████████ weight or eating habits, but there is no notation of Ms. ██████████ bringing the concerns to the doctor's attention. CPSI was given a copy of the medical records.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/16/2014

Contact Method: Phone Call

Contact Time: 12:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/16/2014

Completed date: 04/16/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2014 12:50 PM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to schedule a home visit. A home visit was scheduled for 04/21/2014 at 3:00PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/14/2014

Contact Method: Phone Call

Contact Time: 03:45 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/14/2014

Completed date: 04/14/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/14/2014 04:12 PM Entered By: [REDACTED]

CPSI called the family to reschedule the home visit due to the CPSI being unable to meet with the family at the scheduled time. CPSI spoke with Mr. [REDACTED] would stated he was leaving the home and would have Ms. [REDACTED] call the CPSI to reschedule.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/11/2014

Contact Method:

Contact Time: 01:42 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/11/2014

Completed date: 04/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/11/2014 01:55 PM Entered By: [REDACTED]

CPSI called Dr. [REDACTED] office to inquire about medical records for [REDACTED] and [REDACTED]. CPSI spoke with [REDACTED] Ms. [REDACTED] stated she was having a hard time finding [REDACTED] records. Ms. [REDACTED] stated the office's fax machine is down, but she will fax the CPSI the records this afternoon from another location.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/11/2014

Contact Method:

Contact Time: 01:23 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/11/2014

Completed date: 04/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/11/2014 01:36 PM Entered By: [REDACTED]

CPSI called Dr. [REDACTED] office to check on the medical records requested in February. CPSI was still unable to get through to a live person and unable to leave a message.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/11/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/11/2014

Completed date: 04/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/11/2014 01:31 PM Entered By: [REDACTED]

CPSI received the autopsy report for [REDACTED]. The autopsy stated: "The cause of death is bacterial pneumonia in the setting of severe malnourishment. The degree of malnourishment is unexplained, raising concerns of possible starvation and/or neglect. The pathologic changes in the brain are also unexplained. Hence the manner of death cannot be determined."



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/08/2014

Contact Method:

Contact Time: 02:35 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/11/2014

Completed date: 04/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/11/2014 01:33 PM Entered By: [REDACTED]

CPSI called Dr. [REDACTED] office to check on the medical records the CPSI requested in February. The CPSI was unable to get through to a live person, and the voicemail was full.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/08/2014

Contact Method: Phone Call

Contact Time: 02:25 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/08/2014

Completed date: 04/08/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/08/2014 02:29 PM Entered By: [REDACTED]

CPSI received a phone call from Ms. [REDACTED] with concerns about the autopsy report she received. Ms. [REDACTED] stated the autopsy reports states that the cause of death is undetermined; however, it states that [REDACTED] was malnourished and had pneumonia. CPSI stated that the CPSI has not received a copy of the autopsy as of yet. CPSI explained that the CPSI will check on the status of the copy that the CPSI requested and get back with the family once it is reviewed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/07/2014

Contact Method: Phone Call

Contact Time: 11:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/07/2014

Completed date: 04/07/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/07/2014 11:33 AM Entered By: [REDACTED]

CPSI received a phone call from Ms. [REDACTED] stating her phone number has changed. Ms. [REDACTED] gave the CPSI her new number. A home visit was also scheduled for 04/14/2014 at 3:30PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method:

Contact Time: 09:19 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/04/2014 09:22 AM Entered By: [REDACTED]

Case Conference

[REDACTED] has conferenced this case with CPSI [REDACTED] involving allegations of Neglect Death and Lack of Supervision. CPSI is awaiting autopsy reports and medical records. Services have been recommended for the family due to the loss. Once all information is obtained and documented, CPSI will submit case for review and approval for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 03/14/2014 Contact Method: Face To Face
 Contact Time: 03:27 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 03/17/2014
 Completed date: 03/17/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/17/2014 08:14 AM Entered By: [REDACTED]

CPSI arrived at [REDACTED] to conduct a visit with the family. Ms. [REDACTED] was just getting home from work, and Mr. [REDACTED] was getting ready to leave for work. CPSI observed [REDACTED] and [REDACTED] to be in the livingroom playing. [REDACTED] and [REDACTED] were dressed appropriately with no visible marks or bruises. [REDACTED] stated he was ready to go back to school. [REDACTED] stated he enjoyed his spring break, but he misses his friends. [REDACTED] stated his mother and father are still sad. [REDACTED] stated he knows they are sad because they look sad. [REDACTED] expressed no concerns to the CPSI. Ms. [REDACTED] stated they are still taking it a day at a time. Ms. [REDACTED] and Mr. [REDACTED] stated they have not went to counseling. Ms. [REDACTED] stated they have been keeping busy. Ms. [REDACTED] stated they have family, friends, and eachother to talk to if needed. Ms. [REDACTED] stated [REDACTED] has been talking more about the death of [REDACTED]. Ms. [REDACTED] stated herself and the school are keeping an eye on [REDACTED] to make sure he is okay. Ms. [REDACTED] stated she will let the CPSI know if counseling is necessary. Mr. [REDACTED] asked the CPSI if the CPSI has heard anything about the autopsy. CPSI informed Mr. [REDACTED] that the CPSI is still waiting on the autopsy report. Mr. [REDACTED] stated he does not feel that he will be able to rest easy until the autopsy report comes back. Mr. [REDACTED] stated he just wants to know what happened to his son. Ms. [REDACTED] stated they are on the list to receive a copy of the autopsy report once it is finished. CPSI explained that autopsies can take a while. CPSI informed Ms. [REDACTED] and Mr. [REDACTED] to let the CPSI know if they change their mind about counseling or want [REDACTED] to being counseling. CPSI also informed the family to call with any concerns.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/11/2014

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/11/2014 09:06 AM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to setup a home visit. Ms. [REDACTED] stated they are still taking it a day at a time. Ms. [REDACTED] stated they are still having good days and bad days. A home visit was scheduled for 03/14/2014 at 3:30PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/28/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/28/2014

Completed date: 02/28/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/28/2014 08:19 AM Entered By: [REDACTED]

CPSI received a fax from [REDACTED] Hospital with medical records. The records indicate that [REDACTED] was deceased upon arrival at the hospital. It was also indicated that [REDACTED] appeared to be malnourished. These records will be placed in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/26/2014

Contact Method:

Contact Time: 01:36 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/26/2014

Completed date: 02/26/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/26/2014 01:38 PM Entered By: [REDACTED]

CPSI faxed a request to [REDACTED] to obtain records for [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/26/2014

Contact Method:

Contact Time: 01:34 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/26/2014

Completed date: 02/26/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/26/2014 01:36 PM Entered By: [REDACTED]

CPSI faxed a request to the medical examiner requesting a copy of the autopsy upon completion.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/26/2014

Contact Method:

Contact Time: 01:25 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/26/2014

Completed date: 02/26/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/26/2014 01:28 PM Entered By: [REDACTED]

CPSI called the medical examiner to check on the status of [REDACTED] autopsy. CPSI was told that the autopsy is still pending. CPSI was told to fax a request on letterhead to receive a copy of the autopsy once it is complete.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/25/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/05/2014

Completed date: 03/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/05/2014 04:02 PM Entered By: [REDACTED]

Administrative Review

LI [REDACTED] conferenced this case with Investigator [REDACTED] to ensure that all investigative tasks are being completed. LI informed Inv. [REDACTED] that she needed to make contact with the family every month while the case is open. LI also informed Inv. [REDACTED] that she needed to request medical records for this infant as well as request the autopsy report. There are other children in the home in which Inv. [REDACTED] was to ensure their safety and has found no concerns. The siblings were seen by their PCP to ensure that they were healthy. There are no current concerns with the family. Once the medical records and autopsy report is received, Inv. [REDACTED] will document and place the information in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/18/2014

Contact Method:

Contact Time: 08:59 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/18/2014

Completed date: 02/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/18/2014 09:02 AM Entered By: [REDACTED]

CPSI faxed release of information to Dr. [REDACTED] to obtain medical records for the children.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/14/2014 Contact Method: Face To Face
 Contact Time: 03:15 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 02/18/2014
 Completed date: 02/18/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/18/2014 08:43 AM Entered By: [REDACTED]

CPSI arrived at [REDACTED] to conduct a visit with the family. CPSI observed [REDACTED] to be sleeping. [REDACTED] had no visible marks or bruises. CPSI observed [REDACTED] to be in the livingroom playing. [REDACTED] was observed to be dressed appropriately with no visible marks or bruises. CPSI spoke to [REDACTED] privately. [REDACTED] stated his mother and father have been sad because [REDACTED] died. [REDACTED] stated he is a little sad but not very much. [REDACTED] stated he will see [REDACTED] again when he goes to heaven where [REDACTED] is. [REDACTED] stated he gets in trouble sometimes because of his conduct in school. [REDACTED] stated sometimes he gets a whooping. [REDACTED] stated [REDACTED] gets in trouble for getting into things at home. [REDACTED] stated neither him or [REDACTED] ever have bruises from getting in trouble. [REDACTED] stated he never saw [REDACTED] mistreated. [REDACTED] stated he feels safe at home. [REDACTED] stated his mother and father take care of him and treat him and [REDACTED] well. CPSI spoke with Mr. [REDACTED] and Ms. [REDACTED]. Mr. [REDACTED] stated he is ready for all of this to be over. Mr. [REDACTED] stated it is hard to grieve when people are constantly reminding them of what happened. Ms. [REDACTED] stated they have not begun counseling yet because they feel they are not ready to talk about [REDACTED] yet. Ms. [REDACTED] stated they are taking it a day at a time. Ms. [REDACTED] stated she is having better days. Ms. [REDACTED] stated the family is being very suppoortive. Ms. [REDACTED] stated she took [REDACTED] and [REDACTED] to the doctor. Ms. [REDACTED] stated [REDACTED] had an ear infection and was prescribed antibiotics. Ms. [REDACTED] stated the family had a memorial for [REDACTED] and they are waiting on his ashes from his cremation. CPSI observed a mantle in the home that the family set up in memory of [REDACTED]. CPSI informed the family to call if anything is needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/12/2014

Contact Method: Phone Call

Contact Time: 09:03 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/12/2014

Completed date: 02/12/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/12/2014 09:04 AM Entered By: [REDACTED]

CPSI called Ms. [REDACTED] to schedule a visit to see [REDACTED] A visit was scheduled for 02/14/2014 at 3:30PM.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/11/2014 Contact Method: Attempted Face To Face
 Contact Time: 03:35 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 02/11/2014
 Completed date: 02/11/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact,Sibling Interview/Observation
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/11/2014 03:40 PM Entered By: [REDACTED]

CPSI arrived at [REDACTED] to conduct a visit with [REDACTED] CPSI was told that [REDACTED] was not at school. CPSI spoke with Ms. [REDACTED] (guidance counselor). Ms. [REDACTED] stated [REDACTED] teacher, Ms. [REDACTED] spoke with her about [REDACTED] brother's death. Ms. [REDACTED] stated [REDACTED] has not had any problems at school. Ms. [REDACTED] stated she has an agreement with Ms. [REDACTED] to be informed if [REDACTED] starts acting out or exhibiting bad behaviors. Ms. [REDACTED] stated if something occurs she will call the CPSI.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/11/2014

Contact Method:

Contact Time: 09:42 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/11/2014

Completed date: 02/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/11/2014 09:45 AM Entered By: [REDACTED]

BACKGROUND CHECK

[REDACTED]
JSSI: Speed Limit 55 MPH Zone; Driving While License S/R/C; Petition for Order of Protection

TN Sex Offender: No results

TN Meth Offender: No results

TN Felony Offender: No results

[REDACTED]
JSSI: Viol of Seat Belt Law

TN Sex Offender: No results

TN Meth Offender: No results

TN Felony Offender: No results



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/11/2014

Contact Method: Phone Call

Contact Time: 09:19 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/11/2014

Completed date: 02/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/11/2014 09:22 AM Entered By: [REDACTED]

CPSI called collateral contact [REDACTED] (maternal aunt). Ms. [REDACTED] stated the family is doing much better. Ms. [REDACTED] stated the family is there for one another and making it through this. Ms. [REDACTED] stated she has no concerns for [REDACTED] or [REDACTED]. Ms. [REDACTED] stated she has never seen any signs of abuse or neglect with the children.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/11/2014

Contact Method: Phone Call

Contact Time: 09:12 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/11/2014

Completed date: 02/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/11/2014 09:18 AM Entered By: [REDACTED]

CPSI received a call back from Ms. [REDACTED]. Ms. [REDACTED] stated she has no concerns for the children. Ms. [REDACTED] stated the children are well taken care of. Ms. [REDACTED] stated she sees the children often and has never seen any signs of abuse or neglect. [REDACTED] stated she picked [REDACTED] up from the home around 10:00 or 10:30 for church. Ms. [REDACTED] stated she turns her phone on silent during church. Ms. [REDACTED] stated she left church around 1:00 or 1:30 and saw a text message from Ms. [REDACTED] stating she was at the hospital with [REDACTED] and wanted Ms. [REDACTED] to keep [REDACTED]. Ms. [REDACTED] stated she left [REDACTED] with a friend and went to the hospital herself, but the hospital would not tell her anything.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/11/2014

Contact Method: Attempted Phone Call

Contact Time: 09:11 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/11/2014

Completed date: 02/11/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/11/2014 09:11 AM Entered By: [REDACTED]

CPSI called collateral contact [REDACTED] (maternal aunt). There was no answer. CPSI left a message.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/05/2014

Contact Method: Correspondence

Contact Time: 03:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/06/2014

Completed date: 02/06/2014

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/06/2014 08:19 AM Entered By: [REDACTED]

CPSI received the referral back from CPIT stamped DCS Handle and Return and get autopsy.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/05/2014 Contact Method: Face To Face
 Contact Time: 01:35 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 02/06/2014
 Completed date: 02/11/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/06/2014 08:48 AM Entered By: [REDACTED]

CPSI arrived at [REDACTED] to conduct a home visit with the family. CPSI observed a three bedroom and two bath house with working utilities and food. CPSI observed there to be a room for Mr. [REDACTED] and Ms. [REDACTED] a room for [REDACTED] and a room that [REDACTED] and [REDACTED] share. CPSI observed each child to have their own bed. [REDACTED] slept in a Pack N Play that was appropriate for sleeping. [REDACTED] goes to [REDACTED] and is in the first grade making honor roll. [REDACTED] and [REDACTED] stayed home and did not attend daycare. Ms. [REDACTED] and Mr. [REDACTED] work different shifts and stay home with the children. Ms. [REDACTED] and Mr. [REDACTED] both have full time jobs. Ms. [REDACTED] and Mr. [REDACTED] have been living in their home for seven months with plans to buy the home next year. Ms. [REDACTED] and Mr. [REDACTED] have been together five years and have been married two years. [REDACTED] father is [REDACTED]. Ms. [REDACTED] stated Mr. [REDACTED] is not active in [REDACTED] life. Mr. [REDACTED] stated he has been [REDACTED] father figure since [REDACTED] was one years old. Ms. [REDACTED] stated she had two miscarriages the year [REDACTED] was born. Ms. [REDACTED] stated she had a high risk pregnancy with [REDACTED] due to the recent miscarriages and was put on estrogen. Ms. [REDACTED] stated she found out she was pregnant with [REDACTED] when she was 6 to 7 weeks along and began prenatal care a week later. Ms. [REDACTED] stated her pregnant with [REDACTED] was high risk as well, and she was put back on estrogen. Ms. [REDACTED] stated she started prenatal care with Dr. [REDACTED] and transferred to Dr. [REDACTED] in her 7th month. Ms. [REDACTED] stated the children get medical treatment from Dr. [REDACTED] on [REDACTED] and [REDACTED]. Ms. [REDACTED] stated all the children were up to date on their shots and wellchild checkups. Ms. [REDACTED] stated [REDACTED] is lactose intolerant. Ms. [REDACTED] stated [REDACTED] does not have any medical conditions, but [REDACTED] father does have asthma. Ms. [REDACTED] stated [REDACTED] was one month early. Ms. [REDACTED] stated [REDACTED] weighed 6lbs 8oz and 21 inches long at birth. Ms. [REDACTED] stated [REDACTED] had no medical conditions due to being born early, but [REDACTED] skin was a little translucent at birth. Ms. [REDACTED] stated [REDACTED] had good days and bad days when it came to feedings. Ms. [REDACTED] stated [REDACTED] was lactose intolerant and drank Goodstart Soy milk. Ms. [REDACTED] stated sometimes [REDACTED] would only eat 2 oz of formula at a time. Mr. [REDACTED] stated the doctor stated it was okay if he only had 2 oz at a time. Ms. [REDACTED] stated [REDACTED] drank two 4 oz bottles within a three and a half hour period on Friday 01/31/2014. Ms. [REDACTED] stated Saturday 02/01/2014 [REDACTED] feedings were normal. Ms. [REDACTED] stated [REDACTED] refused to eat Sunday 02/02/2014. Ms. [REDACTED] stated her brothers child was born with fluid on the brain and has a stint in her head now. Ms. [REDACTED] stated she is a triplet. Ms. [REDACTED] stated her and her brothers were born with lack of oxygen and had a delay but could not remember what the delay was. Ms. [REDACTED] stated one of the triplets, [REDACTED], has a mental health disorder but is unsure what the disorder is.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPSI spoke with Ms. [REDACTED] privately. Ms. [REDACTED] stated they had a little birthday party for [REDACTED] on 02/01/2014. Ms. [REDACTED] stated herself, Mr. [REDACTED] and [REDACTED] were present at their home for the party. Ms. [REDACTED] stated everything was fine 02/01/2014. Ms. [REDACTED] stated she woke up close to 8:00 on 02/02/2014 to get [REDACTED] ready to go to church with Ms. [REDACTED] (maternal aunt). Ms. [REDACTED] stated she woke [REDACTED] up to get dressed and to eat. Ms. [REDACTED] stated she then woke [REDACTED] up. Ms. [REDACTED] stated she got [REDACTED] dressed and gave him breakfast. Ms. [REDACTED] stated she then fixed [REDACTED] a bottle before going to wake [REDACTED]. Ms. [REDACTED] stated [REDACTED] and [REDACTED] were watching television at this point. Ms. [REDACTED] stated she got [REDACTED] and tried to feed him, but [REDACTED] did not want to eat. Ms. [REDACTED] stated she played with [REDACTED] for a minute and tried to feed him again. Ms. [REDACTED] stated she put some formula on [REDACTED] lip and he spit it out. Ms. [REDACTED] stated she played with [REDACTED] a little while longer and kissed him on his nose. Ms. [REDACTED] stated she did not think anything of it at the time but looking back [REDACTED] nose was cold to the touch when she kissed [REDACTED] nose. Ms. [REDACTED] stated she put [REDACTED] back in the bed. Ms. [REDACTED] stated she got on the computer to do some homework for about 30 to 45 minutes. Ms. [REDACTED] stated she went to check on [REDACTED] and he appeared to be asleep. Ms. [REDACTED] stated Mr. [REDACTED] then woke up. Ms. [REDACTED] stated she went to get [REDACTED] out of the bed to try to feed him again. Ms. [REDACTED] stated herself and Mr. [REDACTED] passed [REDACTED] back and forth trying to get him to eat. Ms. [REDACTED] stated she put some milk on [REDACTED] lips. Ms. [REDACTED] stated [REDACTED] was holding his mouth open a little. Ms. [REDACTED] stated Mr. [REDACTED] noticed [REDACTED] was clinching and [REDACTED] mouth was pale. Ms. [REDACTED] stated Mr. [REDACTED] was getting worried and being over protective like he always is and wanted to take [REDACTED] to the hospital. Ms. [REDACTED] stated she did not think anything of it but stated they would take [REDACTED] to put Mr. [REDACTED] at ease. Ms. [REDACTED] stated Mr. [REDACTED] went to get gas, and she got [REDACTED] ready. Ms. [REDACTED] stated [REDACTED] was already gone with her sister to church. Ms. [REDACTED] stated she nuzzled (put her nose on his nose) [REDACTED] and [REDACTED] nose was cold. Ms. [REDACTED] stated she did not think anything of it at the time but looking back [REDACTED] was cold to the touch and his fingers were pale. Ms. [REDACTED] stated [REDACTED] was not responsive to touch and his fingers were curled up. Ms. [REDACTED] stated Mr. [REDACTED] returned, and they went to the hospital. Ms. [REDACTED] stated she asked a nurse to check [REDACTED] vitals, but no one would. Ms. [REDACTED] stated they sat in the waiting room. Ms. [REDACTED] stated a nurse looked over at [REDACTED] and grabbed him and ran in a room. Ms. [REDACTED] stated the nurse tried to resuscitate [REDACTED]. Ms. [REDACTED] stated she still does not know what happened to [REDACTED] and she just wants to know. Ms. [REDACTED] stated she scheduled an appointment for counseling for herself and Mr. [REDACTED] through a program at her job. Ms. [REDACTED] stated their appointment is Friday. Ms. [REDACTED] was very nonchalant when talking about the events that occurred with [REDACTED]. Ms. [REDACTED] did not cry and was not emotional responsive to the situation.

CPSI spoke with Mr. [REDACTED] privately. Mr. [REDACTED] stated [REDACTED] was acting normal the night before 02/02/2014. Mr. [REDACTED] stated the family celebrated [REDACTED] birthday, and they put the children to sleep. Mr. [REDACTED] stated [REDACTED] was going to church the next morning with Aunt [REDACTED]. Mr. [REDACTED] stated Ms. [REDACTED] got up when the alarm went off and Mr. [REDACTED] stayed asleep. Mr. [REDACTED] stated Ms. [REDACTED] got the children ready like any other day. Mr. [REDACTED] stated he heard [REDACTED] cry and saw Ms. [REDACTED] get [REDACTED]. Mr. [REDACTED] stated he saw Ms. [REDACTED] feeding [REDACTED] and Mr. [REDACTED] rolled over and went back to sleep. Mr. [REDACTED] stated he woke up around 11:00 or 12:00 and checked on [REDACTED] and [REDACTED]. Mr. [REDACTED] stated [REDACTED] was already gone. Mr. [REDACTED] stated he went to the bathroom. Mr. [REDACTED] stated Ms. [REDACTED] was feeding [REDACTED] when he came out of the bathroom. Mr. [REDACTED] stated [REDACTED] head was moving slowly and [REDACTED] mouth was open. Mr. [REDACTED] stated the movement was not a normal movement. Mr. [REDACTED] stated [REDACTED] was also making a noise that was very faint. Mr. [REDACTED] stated the noise was not a cry or a whine but something different. Mr. [REDACTED] stated Ms. [REDACTED] put milk on [REDACTED] tongue and [REDACTED] spit it out. Mr. [REDACTED] stated himself and Ms. [REDACTED] started passing [REDACTED] back and forth trying to get him to eat. Mr. [REDACTED] stated he put [REDACTED] in his lap and was playing with [REDACTED] feet. Mr. [REDACTED] stated [REDACTED] usually pulls his feet back when Mr. [REDACTED] does this. Mr. [REDACTED] stated [REDACTED] did not pull back. Mr. [REDACTED] stated he touched his nose to [REDACTED] nose. Mr. [REDACTED] stated [REDACTED] usually scrunches his nose up when Mr. [REDACTED] does this, but [REDACTED] did not move. Mr. [REDACTED] stated he passed [REDACTED] back to Ms. [REDACTED]. Mr. [REDACTED] stated he was just staring at [REDACTED]. Mr. [REDACTED] stated he had a bad feeling and [REDACTED] looked weak. Mr. [REDACTED] stated he wanted to take [REDACTED] to the hospital, but Ms. [REDACTED] stated [REDACTED] would be fine. Mr. [REDACTED] stated he continued to stare at [REDACTED] and could not help but think something was wrong. Mr. [REDACTED] stated he was taking [REDACTED] to the hospital no matter how Ms. [REDACTED] felt about it. Mr. [REDACTED] stated he told Ms. [REDACTED] to get the children ready. Mr. [REDACTED] stated he left to put gas in the truck. Mr. [REDACTED] stated his hands were



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

cold when he returned. Mr. [REDACTED] stated he touched [REDACTED] face with his finger and [REDACTED] did not move. Mr. [REDACTED] stated [REDACTED] hands were up and his fists were clinched. Mr. [REDACTED] stated he moved [REDACTED] arm to straighten it out and [REDACTED] arm slowly went back to the same position. Mr. [REDACTED] stated himself, Ms. [REDACTED] and [REDACTED] got in the car and went to the hospital. Mr. [REDACTED] stated he parked at the front door and ran in the hospital. Mr. [REDACTED] stated no one would check on [REDACTED] and Mr. [REDACTED] was getting upset. Mr. [REDACTED] stated he asked a nurse to check [REDACTED] vitals and the nurse told him to have a seat. Mr. [REDACTED] stated a nurse walked by and looked at [REDACTED]. Mr. [REDACTED] stated the nurse immediately grabbed [REDACTED] and ran to the back with him. Mr. [REDACTED] stated himself and Ms. [REDACTED] were put in a room and no one would tell them what was going on. Mr. [REDACTED] stated it was a long time before anyone told them that [REDACTED] was deceased. Mr. [REDACTED] was very emotional. Mr. [REDACTED] cried the entire interview and blamed himself for [REDACTED] death. Mr. [REDACTED] felt like there was something he could of done that would have saved [REDACTED].

CPSI spoke with Ms. [REDACTED] (paternal grandmother) privately. Ms. [REDACTED] stated she received a phone call from Mr. [REDACTED] on 02/02/2014 between 2:00 and 4:00. Ms. [REDACTED] stated Mr. [REDACTED] was crying and not making any sense. Ms. [REDACTED] stated she could not hear what Mr. [REDACTED] was saying so she hung up and called back. Ms. [REDACTED] stated Ms. [REDACTED] answered the phone when she called back. Ms. [REDACTED] stated Ms. [REDACTED] told her that [REDACTED] was dead. Ms. [REDACTED] stated she was trying to get information about what happened. Ms. [REDACTED] stated Mr. [REDACTED] and Ms. [REDACTED] kept passing the phone back and forth. Ms. [REDACTED] stated she got some information from both Mr. [REDACTED] and Ms. [REDACTED] and was able to make sense of what was happening. Ms. [REDACTED] stated Ms. [REDACTED] was calmer than Mr. [REDACTED] but Ms. [REDACTED] did hear Ms. [REDACTED] sniffing on the phone. Ms. [REDACTED] stated she also thinks she heard Ms. [REDACTED] cry out at one point. Ms. [REDACTED] stated she got on the next bus from [REDACTED] and came to be with Mr. [REDACTED] and Ms. [REDACTED]. Ms. [REDACTED] stated she sees the children every three months. Ms. [REDACTED] stated herself, Mr. [REDACTED] and Ms. [REDACTED] take turns visiting. Ms. [REDACTED] stated she has never had any concerns for the children. Ms. [REDACTED] stated she did baby proof the house a little more since she has been in the home. Ms. [REDACTED] stated she put protective coverings on the sockets and plastic caps on the doorknobs to prevent the children from injuring themselves or walking out of the home unattended. Ms. [REDACTED] stated she is able to stay in the home with Mr. [REDACTED] and Ms. [REDACTED] as long as needed. Ms. [REDACTED] stated both Mr. [REDACTED] and Ms. [REDACTED] are very upset. Ms. [REDACTED] stated Mr. [REDACTED] does not want anyone to see him cry, but Ms. [REDACTED] has heard him crying and noticed Mr. [REDACTED] did not eat anything until 02/04/2014. Ms. [REDACTED] stated there has been one other child death in the family. Ms. [REDACTED] stated her grandson died hours after birth due to heart problems.

Ms. [REDACTED] made a doctors appointment for [REDACTED] and [REDACTED] to check on their health before the CPSI left the home. The children will be seeing Dr. [REDACTED] 02/06/2014 at 2:30PM.

CPSI observed [REDACTED] to appear healthy with no visible marks or bruises and no visible signs of neglect. [REDACTED] was running around playing and laughing during the duration of the visit.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/05/2014

Contact Method: Phone Call

Contact Time: 11:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/05/2014

Completed date: 02/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2014 11:47 AM Entered By: [REDACTED]

CPSI received a phone call from Dr. [REDACTED] stated she is concerned because she has a report from a wellchild check up that states [REDACTED] was 7lbs and healthy last month, and now [REDACTED] weighs only 5lbs, is emaciated, has no fat tissue, and appears to be malnourished. Dr. [REDACTED] stated she is also concerns because the parents transported the child to the hospital in their personal vehicle rather than calling an ambulance. Dr. [REDACTED] stated the nurse that saw [REDACTED] upon arrival stated [REDACTED] appeared to already be deceased.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/05/2014

Contact Method: Attempted Phone Call

Contact Time: 10:16 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/05/2014

Completed date: 02/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2014 11:20 AM Entered By: [REDACTED]

CPSI called Dr. [REDACTED] (medical examiner) to ask about the concerns that she has. CPSI left a message for a callback.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/05/2014

Contact Method: Attempted Phone Call

Contact Time: 10:16 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/05/2014

Completed date: 02/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2014 11:18 AM Entered By: [REDACTED]

CPSI called the referent. The referent was not able to take the phone call.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	02/04/2014	Contact Method:	
Contact Time:	04:41 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	02/05/2014
Completed date:	02/05/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 02/05/2014 11:17 AM Entered By: [REDACTED]

CPSI called LI [REDACTED] to asked about the other children. LI [REDACTED] stated [REDACTED] and [REDACTED] were left in the home with their parents. LI [REDACTED] stated there were no concerns at the time, but Dr. [REDACTED] has stated that she is concerned about a couple of things. LI [REDACTED] stated she does not know what the concerns are.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 02/03/2014 Contact Method: Face To Face
 Contact Time: 09:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 02/05/2014
 Completed date: 02/05/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2014 11:33 AM Entered By: [REDACTED]

CPSI received the following notes from CPSI [REDACTED]. CPSI was told that CPSI [REDACTED] observed [REDACTED] and [REDACTED] however, it is not notated in the following notes.

Investigator III, [REDACTED] conducted a home visit to [REDACTED] around 9:00pm. The father invited this worker into the family three bedrooms and one bath home. The mother informed this worker of waking the three boys up around 8:00am on 2-2-14. The mother stated [REDACTED] age 6, got dress for church, and she changed [REDACTED] and [REDACTED] pampers. The mother gave the two years old something to eat for breakfast and [REDACTED] drank very little milk from his 4 ozs bottle. The mother stated she played with [REDACTED] for a while before putting him down in his crib as he went back to sleep. [REDACTED] watched television and she began working on her homework for school. Around 11:00am, the father [REDACTED] Sr, awoken and got dressed. The father stated he awoke the infant around 12:00 noon. The father attempted to give the infant his bottle; however, the infant spit the milk out of his mouth. The father stated he held the infant in his arms facing himself, talking and playing with the infant. The infant was alert; however, not as playful and active as he was earlier. The father took the infant into the living room where the mother was working on her homework. The mother and father were passing the infant back and forward stating something is wrong with the infant because he was not as playful nor was he making noises. The father stated he suggested taking the infant to the hospital. The parents took the infant to [REDACTED] Hospital on [REDACTED] along with the two years old. The mother stated the three boys had a cough/cold three days prior to 2-2-14. She had given the children Tylenol for their cough. The mother stated [REDACTED] the infant was born one month early: 6 8 and 21 inches. She gave birth at [REDACTED] Hospital. The mother stated she is a senior at [REDACTED] and employed at [REDACTED] in housekeeping for the past two years. The father stated he has been employed with [REDACTED] for the pass three and one half years. [REDACTED] was called to [REDACTED] and the [REDACTED] Crime Scene Unit came to their home and took pictures on 2-2-14, after they left [REDACTED] Hospital on [REDACTED].

Investigator and the mother went over the DCS forms and the mother signed the following: Acknowledgement of Client Right Handbook, Veto Verification of Native American, HIPAA Privacy Practices, Grievance Procedure, and Release of Information for the Adult and Child.

This information was shared with [REDACTED], Lead Investigator.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Household consists:

[REDACTED]

Narrative Type: Addendum 2 Entry Date/Time: 02/05/2014 11:35 PM Entered By: [REDACTED]

Investigator III [REDACTED] was also informed by the mother of taking [REDACTED] to the doctor on 12-9-13, on 12-10-13, to his pediatrician, on 12-28-13 for his 4 week check up. the mother also stated she took [REDACTED] to the WIC office sometime in December 2013. The mother stated each time she took [REDACTED] to the WIC or doctor's office a nurse saw [REDACTED] and it was stated [REDACTED] was doing good to be a pre-mature baby.

Narrative Type: Addendum 1 Entry Date/Time: 02/05/2014 05:58 PM Entered By: [REDACTED]

Investigator III [REDACTED] observed the family three bedrooms and one bath home clean, without clutter and no odor. This worker observed the kitchen and Dinningroom area with several balloons, birthday napkins, a birthday banner stating "Happy Birthday [REDACTED] [REDACTED] -two years old", and a container with a cake/cup cakes sitting on the table. There was also a red plastic table cloth was on the Dinningroom table. The parents informed this worker they had a birthday party for [REDACTED] on Saturday night, 2-1-14, however, his birthday was 1-27-14. This worker wished [REDACTED] Happy Birthday and asked him what did he get for his birthday, whereas, he only smiled. This worker asked [REDACTED], age 6, did he enjoy the cake that was for the birthday and he replied yes. Both of the boys were observed clean and without visible bruises or marks on their body. The two boys appear to be happy by smiling and talking to this worker. This worker observed the boys bed rooms and each of them had a television and their own bed or crib. [REDACTED] and [REDACTED] shared a bedroom and pictures were taken of the two boys standing beside one another. [REDACTED] has a regular size bed in his bedroom. Photos of the infant clothes, Good Start Soy Milk and his crib were also taken. This worker was informed by the mother, that she had not moved anything of the infant from his bedroom since Sunday. The mother also stated the [REDACTED] Crime Scene Unit followed them home on Sunday, 2-2-14, after leaving [REDACTED] Hospital on [REDACTED]. The [REDACTED] Crime Scene Unit took pictures of the family home. There were several family members visiting the family home during this interview. The visiting family members were in the Livingroom while this interview took place in the Dinningroom. The mother cell number is [REDACTED] and the father cell number is [REDACTED]. The parents were informed another Investigator will make contact with them regarding this case, since this Investigator works the 2nd Shift.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/03/2014

Contact Method:

Contact Time: 06:50 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/05/2014

Completed date: 02/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2014 11:09 AM Entered By: [REDACTED]

The department received this referral 02/03/2014 with allegations of lack of supervision on [REDACTED] by [REDACTED] and [REDACTED] and Neglect Death on [REDACTED] by Unknown. The referral stated: This will serve as notification that the [REDACTED] Medical Examiner is investigating the death of [REDACTED]. This 1 month-old infant was found unresponsive in his crib at approximately 1100-1200 hrs on the morning of 2/02/14 by his mother at their residence at [REDACTED] and transported by them to [REDACTED] Hospital where death was pronounced at 1441 Hours. A scene investigation was conducted by this office and the [REDACTED] Police Department, and the decedents remains were transported to this office for autopsy. The cause/manner of death are pending at this time. The mothers name is [REDACTED] and the father is [REDACTED]. Two siblings also live int eh house. Our case # is [REDACTED].

TFACTS HISTORY

Ms. [REDACTED] has history as a child.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/03/2014

Contact Method:

Contact Time: 06:50 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/05/2014

Completed date: 02/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2014 06:59 PM Entered By: [REDACTED]

Case Assignment

On February 3, 2014 at 6:50 p.m. a P-1 referral was called into Central Intake. The referral was screened into [REDACTED] @ 7:48 p.m. [REDACTED] with the allegations of Lack of Supervision and Neglect Death. The alleged victim is [REDACTED]. The alleged perpetrator is the Birth Mother, [REDACTED] and [REDACTED], Birth father. The referral was assessed and assigned by TL [REDACTED] on 2-3-14 to Investigator, [REDACTED]. Response time is due by 2-4-14 by 6:50 p.m. [REDACTED]. It is unknown at this time if the child(ren) are of Native American descent. The referent letter was mailed on 2-7-14. Juvenile Court and the District Attorney are notified of referrals and classification within 7 days per local protocol and policy. The FSW will contact the referent within 30 days.



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 2/3/14 6:50 PM

Date of Assessment: 2/3/14 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.



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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): The child is deceased.

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: _____